

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

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STATE OF HAWAII
OFFICE OF HEALTH CARE ASSURANCE

Facility's Name: Faith Harbor Adult Care	CHAPTER 100.1
Address: 5783 Kalaniana'ole Highway, Honolulu, Hawaii 96821	Inspection Date: April 13, 2016 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p>FINDINGS Resident #1 – “Hold aspirin 10/30-11/6/15” ordered; however, the medication records reflected the aspirin was given on 10/30/15 and held 10/31/15 through 11/8/15. There was no physician order to change the dates originally indicated.</p> <p>Resident #1 – “Acetaminophen 500 mg Take 1 tab by mouth every 6 hours as needed for fever or pain limit 4 tabs per day” ordered 2/26/16; the medication label and medication record reflected “every 4 hours.”</p>	<p>Aspirin deficiency cannot be corrected. In the future whenever hold on medicine is set, proper parameters will be MARKED OFF/highlighted on the MAR.</p> <p>Tylenol deficiency was corrected by making new label to reflect correct frequency. Going over MAR and most current medication order will be now done on the monthly basis to avoid discrepancies and errors.</p>	4/28/16
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports</u>. (b)(8) During residence, records shall include:</p>	<p>Amended progress notes entries were made to document Resident #1 doctor visits, and what</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>Notation of visits and consultations made to resident by other professional personnel as requested by the resident or the resident's physician or APRN;</p> <p>FINDINGS Resident #1 – No notation of visits to consultants and physician: 2/26/16, 1/25/16, 7/31/15.</p>	<p><i>was discussed at those appointments. Information was gathered from caregiver who was present at those visits and after visit summary print out.</i></p> <p><i>In the future - progress note entry will be made right after doctor's visit, detailing questions/concerns discussed, changes in care plan or medications, and other important information.</i></p>	<p><i>4/28/16</i></p>
<p><input checked="" type="checkbox"/></p>	<p>§11-100.1-17 <u>Records and reports.</u> (c) Unusual incidents shall be noted in the resident's progress notes. An incident report of any bodily injury or other unusual circumstances affecting a resident which occurs within the home, on the premises, or elsewhere shall be made and retained by the licensee or primary care giver under separate cover, and shall be made available to the department and other authorized personnel. The resident's physician or APRN shall be called immediately if medical care may be necessary.</p> <p>FINDINGS Resident #1 – No incident reports for the following:</p> <ol style="list-style-type: none"> 1. Fall on 1/24/16 2. Bruises noted to the left upper arm from a possible fall on 12/20/15 3. Choking episode requiring the Heimlich maneuver on 7/30/15 	<p><i>Amended incident reports were created for all 3 incidents, based on the progress note entries which were already on hand, and oral record of staff involved.</i></p> <p><i>IN the future, when incident occurs - progress notes and incident report will be written out at the same time, to properly document what had happened.</i></p> <p><i>Furthermore, current incident report form has been revised to include additional space and fill-in blanks where date and time of notification to doctors and family can be recorded. This will reduce chances of overlooking to record that pertinent information.</i></p>	<p><i>4/28/16</i></p>
<p><input checked="" type="checkbox"/></p>	<p>§11-100.1-19 <u>Resident accounts.</u> (d) An accurate written accounting of resident's money and disbursements shall be kept on an ongoing basis, including receipts for expenditures, and a current inventory of resident's possessions.</p> <p>FINDINGS</p>	<p><i>Resident's #1 closing and accessories inventory has been updated to reflect current gifted and purchased increases in inventory.</i></p> <p><i>In the future, inventory will be updated as needed at the time additions or disposals of items are made</i></p>	<p><i>4/28/16</i></p>

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	Resident #1 – Inventory of possessions has not been maintained since 9/16/14.		
☒	<p>§11-100.1-23 <u>Physical environment.</u> (1)(1) An enclosed dining area within the Type I ARCH shall be provided for residents which shall be apart from sleeping quarters but may be in continuity to the living room area. The following shall prevail:</p> <p>At least one table with twenty nine inches clearance between floor and lower edge shall be provided to allow for those residents using wheelchairs;</p> <p>FINDINGS Table clearance was 28 ½ inches for the wheelchair resident.</p>	<p>Over time the use of table has caused the end sections (previously at 29" clearance) to loosen and lower in height. Table has been repaired to correct this deficiency.</p> <p>If the future, to prevent the table from drooping lower than the permitted height for wheelchair residents; table will be visually and with tape measure inspected for any loosening or drooping on monthly basis.</p>	4/27/16

Licensee's/Administrator's Signature: *J. Popova*

Print Name: VERA POPOVA

Date: 4/29/16