

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

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| Facility's Name: Hale Puuhonua | CHAPTER 100.1 |
| Address: 15-1735 19 th Avenue, Keaau, Hawaii 96749 | Inspection Date: May 27, 2016 Annual |

| | Rules (Criteria) | Plan of Correction | Completion Date |
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| <input checked="" type="checkbox"/> | <p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (e)(4) The substitute care giver who provides coverage for a period less than four hours shall:</p> <p>Be trained by the primary care giver to make prescribed medications available to residents and properly record such action.</p> <p><u>FINDINGS</u> No care giver training provided by primary care giver (PCG) to all five (5) substitute care givers (SCG), to make prescribed medications available.</p> | <p>PCG has trained all SCGs on the proper procedure to make prescribed medications available. To ensure this problem does not re-occur, PCG has amended training program for all new SCGs to include proper procedures for making prescribed medications available. Training documentation is maintained in the "Employees" binder in the PCGs office. Training will be conducted with all new trainees and at any time PCG determines refresher training is needed.</p> | 6/20/16 |
| <input checked="" type="checkbox"/> | <p>§11-100.1-12 <u>Emergency care of residents and disaster preparedness.</u> (a)(1) The licensee shall maintain written procedures to follow in an emergency which shall include provisions for the following:</p> <p>Arranging for immediate transfer or evaluation by a physician</p> | <p>Facility does have a policy for emergency care of residents and disaster preparedness, but a copy was not available for the nurse consultant's review during inspection. PCG has placed a copy of these procedures in the care home binder. Additional copies have also been placed in tab 9 of each resident's chart.</p> | 6/20/16 |

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| | <p>for any resident who becomes acutely ill, injured, or dies;</p> <p>FINDINGS No emergency procedures.</p> | | |
| <input checked="" type="checkbox"/> | <p>§11-100.1-13 <u>Nutrition</u>. (a) The Type I ARCH shall provide each resident with an appetizing, nourishing, well-balanced diet that meets the daily nutritional needs and diet order prescribed by state and national dietary guidelines. To promote a social environment, residents, primary care givers and the primary care giver's family members residing in the Type I ARCH shall be encouraged to sit together at meal times. The same quality of foods provided to the primary care givers and their family members shall be made available to the residents unless contraindicated by the resident's physician or APRN, resident's preference or resident's family.</p> <p>FINDINGS No documented menu substitutions.</p> | <p>PCG is now maintaining menu substitution records in the care home binder. PCG has instructed all SCGs in proper procedures to document menu substitutions.</p> <p>SEE ATTACHED</p> | <p>6/20/16</p> <p>7/4/16</p> |

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| <input checked="" type="checkbox"/> | <p>§11-100.1-13 <u>Nutrition</u>. (b) Menus shall be written at least one week in advance, revised periodically, dated, and followed. If cycle menus are used, there shall be a minimum of four weekly menus.</p> <p><u>FINDINGS</u> No four (4) week menu for department review. Menus are created daily.</p> | <p>PCG has prepared and is posting a minimum of a four week cycle of menus. Menus are dated to indicate to the residents and staff which menu is applicable to which week.</p> | <p>6/28/16</p> |
| <input checked="" type="checkbox"/> | <p>§11-100.1-15 <u>Medications</u>. (b) Drugs shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Medications that require storage in a refrigerator shall be properly labeled and kept in a separate locked container.</p> | | |
| | <p><u>FINDINGS</u> Daily medications pre-poured into pill minders by PCG for SCG to administer throughout the day.</p> | <p>PCG has trained all SCGs to prepare & administer prescribed residents as needed. PCG has amended training procedures to include medication preparation and administration for all new SCGs.</p> | <p>6/28/16</p> |
| <p>SEE ATTACHED</p> | | | <p>7/4/16</p> |

11-100.1-13 (a) PCG is now maintaining menu substitution records in the care home binder. PCG has instructed all SCGs in proper procedures to document menu substitutions. PCG will review menu substitution log on a monthly basis and as needed to ensure substitute caregivers are properly completing this form.

11-100.1-15 (b) PCG has trained all SCGs to prepare & administer prescribed resident medications as needed. PCG has amended training procedures to include medication preparation and administration for all new SCGs. PCG will review MARs weekly and observe each SCG at least once a month while they prepare and administer medications to ensure SCGs follow proper procedures.

A handwritten signature in cursive script, appearing to read "Robert Qi".

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| <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><u>FINDINGS</u> Resident #1, physician order dated November <u>11</u>, 2015 read:</p> <ul style="list-style-type: none"> • “Amantadine 100 mg capsule, one capsule PO BID DC” • “Lamotrigine (Lamictal) 50 mg tablet, one tablet PO TID DC” • “Mirtazapine 15 mg tablet, one tablet POC @ HS DC” • “Clonazepam 1 mg tablet, one tablet TID as needed for anxiety or agitation, hold for sedation DC” <p>However, all medications initialed as administered on the November 2015 medication record, November <u>11 – 18</u>, 2015.</p> | <p>PCG made a documentation error. To prevent this error from reoccurring, PCG will, on a monthly basis, carefully review all MARs and have a SCG review all MARs to detect documentation errors.</p> | <p>6/20/16</p> |
| <input checked="" type="checkbox"/> | <p>§11-100.1-15 <u>Medications</u>. (h) All telephone and verbal orders for medication shall be recorded immediately on the physician's order sheet and written confirmation shall be obtained at the next physicians visit and not later than four months from the date of the verbal order for the medication.</p> <p><u>FINDINGS</u> 1) Resident #1, December 2015 monthly progress note</p> | <p>PCG will document all telephone orders on the physician order sheet. To prevent this error from reoccurring, PCG has trained one SCG to review resident charts monthly to detect documentation errors.</p> | <p>6/20/16</p> |

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| | <p>and December 2015 medication record read:</p> <ul style="list-style-type: none"> • “Telephone order for PRN Tylenol 500 mg PO BID” <p>However, no telephone order documented on the physician order sheet and no physician signature obtained.</p> <p>2) Resident #1, January 2016 monthly progress note and January 2016 medication record read:</p> <ul style="list-style-type: none"> • “Allegra one tablet daily as needed” <p>However, no telephone order documented on the physician order sheet and no physician signature obtained.</p> | <p><i>(See previous page)</i></p> | |
| <input checked="" type="checkbox"/> | <p>§11-100.1-17 <u>Records and reports.</u> (b)(3) During residence, records shall include:</p> <p>Progress notes that shall be written on a monthly basis, or more often as appropriate, shall include observations of the resident's response to medication, treatments, diet, care plan, any changes in condition, indications of illness or injury, behavior patterns including the date, time, and any and all action taken. Documentation shall be completed immediately when any incident occurs;</p> <p>FINDINGS Resident #1, monthly weight record reflected resident weighed 134 pounds (lbs) in January 2016 and 142 lbs. in February 2016. No documentation that the physician was made aware of the eight (8) lb. weight gain between January and February 2016 noted in the February 2016 monthly progress notes.</p> | <p>PCG will notify PMD and document in the resident's chart any time resident gains or loses more than five pounds in one month's time.</p> | <p><i>6/20/16</i></p> |
| <input checked="" type="checkbox"/> | <p>§11-100.1-84 <u>Admission requirements.</u> (b)(4) Upon admission of a resident, the expanded ARCH licensee</p> | | |

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| | <p>shall have the following information:</p> <p>Evidence of current immunizations for pneumococcal and influenza as recommended by the ACIP; and a written care plan addressing resident problems and needs.</p> <p>FINDINGS Resident #1, no evidence of current influenza and pneumococcal vaccinations.</p> | <p>PCG will ensure resident's records include evidence of current influenza and pneumococcal vaccinations upon admission. To prevent this error from reoccurring, PCG has designated a SCG to review resident charts after each new admission to detect documentation errors.</p> | <p>6/20/16</p> |

Licensee's/Administrator's Signature: Robert Olin
 Print Name: ROBERT OLIN
 Date: 6/20/16

Licensee's/Administrator's Signature: Robert Olin
 Print Name: ROBERT OLIN
 Date: 7/4/16