

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

2016-05-04 10:10 AM
 DEPT. OF HEALTH CARE ASSURANCE

Facility's Name: Marquez, Luz (ARCH/Expanded ARCH)	CHAPTER 100.1
Address: 94-908 Kumuao Street, Waipahu, Hawaii 96797	Inspection Date: May 4, 2016 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (a)(4) The licensee or primary care giver shall maintain individual records for each resident. On admission, readmission, or transfer of a resident there shall be made available by the licensee or primary care giver for the department's review:</p> <p>A report of a recent medical examination and current diagnosis taken within the preceding twelve months and report of an examination for tuberculosis. The examination for tuberculosis shall follow current departmental policies;</p> <p>FINDINGS Resident#1 No documentation of two step tuberculosis clearance obtained prior to admission.</p>	<p>ON MAY 9 2015 RESIDENT #1 HAD HIS TB SKIN TEST DONE AND WAS FREE OF COMMUNICABLE DISEASE ON JULY 22 HE HAD ANOTHER TB SKIN TEST (2015) AND WAS FREE OF COMMUNICABLE DISEASE ON MAY 9 2016 TOOK RESIDENT NOTI TO THE DEPARTMENT OF HEALTH T.B BRANCH FOR CONSULTATION AND THE NURSE SAID HE DONT NEED ANY TB TESTING BUT HE WOULD NEED ANOTHER OM IN 7 OF 2016 COPIES INSERTED. IN THE FUTURE I WILL MAKE SURE THE RESIDENT HAS A 2 STEP TB CLEARANCE BEFORE ADMISSION AND KEEP IT ON FILE ON FOLDER</p>	<p>MAY 9 2016</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-86 <u>Fire safety.</u> (a)(3) A Type I expanded ARCH shall be in compliance with existing fire safety standards for a Type I ARCH, as provided in section 11-100.1-23(b), and the following:</p>	<p>ON APRIL 30, 2016 AT 830 AM A FIRE DRILL WAS DONE WITH 4 RESIDENTS & 3 HOUSEHOLD</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
	Fire drills shall be conducted and documented at least monthly under varied conditions and times of day; FINDINGS No fire drill documentation for 4/16.	MEMBER LASTED 3 MIN. BUT FORGOT TO DOCUMENT IT. IN THE FUTURE I WILL MAKE SURE TO DO A FIRE DRILL EVERY MONTH AT VARIOUS CONDITIONS & TIMES OF DAY AND REMEMBER TO DOCUMENT IT IMMEDIATELY SO I WON'T FORGET IT.	5/4/14

Licensee's/Administrator's Signature: Luz Marquez

Print Name: LUZ MARQUEZ

Date: 5/19/14