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Office of Health Care Assurance

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State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION STATE OF HAWAII
DOH-OHCA LICENSING

Facility's Name: Daligcon, Norma (ARCH/Expanded ARCH)	CHAPTER 100.1
Address: 1586 Lehua Street, Honolulu, Hawaii 96819	Inspection Date: May 10, 2016 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p>FINDINGS Two (2) packets of Ibuprofen stored in first aid kit.</p>	<p><i>Ibuprofen medication was removed from first aid kit. To prevent deficiency in the future, I created a checklist of appropriate materials that should be in a kit. This checklist will be used to conduct a monthly check to make sure the kit is filled properly.</i></p>	<p><i>5/17/16</i></p>

Licensee's/Administrator's Signature: Norma Daligcon

Print Name: NORMA DALIGCON

Date: 6/02/16