

Office of Health Care Assurance

State Licensing Section

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION STATE OF HAWAII  
L.H.P.H.S. LICENSING

Facility's Name: Winmax Senior Care L.L.C.	CHAPTER 100.1
Address: 3808 Harding Avenue, Honolulu, Hawaii 96816	Inspection Date: April 7 & 8, 2016 Annual

	Rules (Criteria) <small>MSC = Manoa Senior Care</small>	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (a) All individuals who either reside or provide care or services to residents in the Type I ARCH, shall have documented evidence that they have been examined by a physician prior to their first contact with the residents of the Type I ARCH, and thereafter shall be examined by a physician annually, to certify that they are free of infectious diseases.</p> <p><b>FINDINGS</b> Substitute care giver #1 – No documentation of a physical examination (PE) prior to contact with residents. The care giver's name was not noted on the PE form. <b>Submit copy with the plan of correction.</b></p>	<p>The nurse's physical exam document was faxed to the physician's office. The physician's office made the revision and included a notation that they were the party to do the revision.</p> <p>To prevent reoccurrence the MSC Human Resources Generalist will check each staff qualification form for accuracy before placing it into the MSC staff qualification master binder. Staff will be informed of any corrections needed.</p>	4/27/16
<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><b>FINDINGS</b></p>		

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	<p>Resident #2 – “Calcium citrate 250 mg Take 250 mg by mouth daily” ordered 2/9/16; the label noted: “calcium citrate 250 mg 1 tab po daily.” The manufacturer’s label noted that the tablet contained “500 mg” of calcium. The substitute care giver stated “1/2 tablet” is given to the resident.</p>	<p>The Calcium order was clarified with the primary physician on 4/19/16. The order was changed by the primary physician to “Calcium Citrate 500mg 2 tabs po daily. Serving size on bottle – 2 tabs equals 500mg”. DON reviewed with both nurses in the home that the physician orders and manufacturer’s label on the medication bottle or prescription need to be an exact match.</p>	<p>4/19/16</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><b><u>FINDINGS</u></b> Resident #2 – Progress notes did not include observations of the resident’s response to “Ensure Plus or equivalent” (ordered 2/9/16).</p>	<p>The DON/ADON will do informal and periodic random chart/medication audits to ensure compliance.</p> <p>This citation occurred during inspection at MSC’s 2870 Oahu Ave. inspection in January 2016. At that time, all MSC nurses were informed of the new policy that: Observations of the resident’s response to ordered supplements like Ensure or equivalent and /or consistency modified diets will be documented in the “notes” section of the MSC monthly summary form. When DON reviewed Resident #2’s chart, the resident’s response to the “Ensure Plus or equivalent” was charted from the January 2016 monthly summary and going forward to present. The DON/ADON will do periodic random chart audits to ensure compliance.</p>	<p>4/15/16</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-54 <u>General operational policies.</u> (1) In addition to the requirements in section 11-100.1-7, the Type II ARCH shall have general operational policies on the following topics:</p> <p>Nursing services, delegation and staffing pattern/ratio;</p> <p><b><u>FINDINGS</u></b> Resident #1 – Corrections made in the progress notes for 4/6/16 and 3/13/16 were not consistent with the facility “Charting Guidelines.”</p>	<p>Both Nurses in the home were reminded on the procedure to make corrections in the progress notes. Specifically, the word or words charted should be lined out with one line and the word “error” and nurse initials should be noted above or next to the deletion. The DON/ADON will do periodic and random chart audits to ensure compliance.</p>	<p>4/15/16</p>

	Rules (Criteria)	Plan of Correction	Completion Date
☒	<p>§11-100.1-23 <u>Physical environment</u> (h) The Type I ARCH shall maintain the entire facility and equipment in a safe and comfortable manner to minimize hazards to residents and care givers.</p> <p><b>FINDINGS</b> Bedroom #4 – One (1) window crank opening mechanism was stuck.</p>	<p>A replacement for the window crank opening mechanism has been ordered and will be delivered within 6-8 weeks. Once received, the current crank opening mechanism will be replaced.</p> <p>The Director of Facilities Management will do periodic checks in the home to identify any maintenance issues that need to be fixed.</p>	7/11/16
☒	<p>§11-100.1-23 <u>Physical environment</u> (h)(1)(A) The Type I ARCH shall maintain the entire facility and equipment in a safe and comfortable manner to minimize hazards to residents and care givers.</p> <p>Housekeeping:</p> <p>A plan including but not limited to sweeping, dusting, mopping, vacuuming, waxing, sanitizing, removal of odors and cleaning of windows and screens shall be made and implemented for routine periodic cleaning of the entire Type I ARCH and premises;</p> <p><b>FINDINGS</b> Bedroom #2 &amp; #7 – Bathroom window, outside part of the window sill had paint chip accumulation.</p> <p>Bedroom #3 – Bathroom wall next to the toilet had brown stains.</p>	<p>The windows located in rooms 2 and 7 have what appears to be flakes/chips of a brown material between the 2 glass panes. After talking to our Milgard Windows representative, he said this material does not create a health hazard. The flaking/chipping has not destroyed the integrity of the windows since none of the flakes/chips are found outside of the window, on the sill or on the floor. The window panes and seal around all edges are still intact and there are no signs of condensation or water seepage between the glass panes. The MSC Facilities Maintenance Director left a telephone message for Edwin Jatco on 4/29/16.</p> <p>The resident in room #3 has passed away and the room has since been thoroughly cleaned. DON spoke to the House Supervisor (primary day shift Nurse Aide) who is in charge of housekeeping in the home. Specifically, that during cleaning of a resident's room, which is scheduled to be cleaned once a week, an inspection should be done to check for thoroughness and any maintenance needs. The Director of Facilities Management will also do periodic checks in the home to identify any maintenance/cleaning issues that need to be fixed.</p>	4/29/16  4/26/16
☒	<p>§11-100.1-23 <u>Physical environment</u> (i)(2) All construction or alterations shall comply with current county building, land use and fire codes and ordinances in the state. The Type I ARCH licensed for wheelchair residents shall be accessible to and functional for the residents at the</p>		

