

Office of Health Care Assurance

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State Licensing Section

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

OFFICE OF HEALTH CARE ASSURANCE
STATE LICENSING SECTION

Facility's Name: ALDE Care Home	CHAPTER 100.1
Address: 94-1475 Hiapo Street, Waipahu, Hawaii 96797	Inspection Date: August 4, 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><u>FINDINGS</u> Resident #1 – "l-arginine" ordered on 3/23/16 without the strength, dosage and frequency specified.</p> <p>Resident #1 – "Vytorin 10-40 mg tab take 1 tab at bedtime" ordered 6/24/16; however, the medication was not reflected on the June 2016, July 2016 and August 2016 medication records.</p>	<p>Resident #1 - L-ARGININE has been verbally ordered by his doctor and then labeled accordingly with the strength, dosage and frequency and I will properly label any medications for proper identification.</p> <p>Resident #1 Vytorin 10/40 has been given and corrected in MTR. I will write all medications everyday so that I will not miss any and at the end of the day I will double check if all medications are complete and written on MTR.</p>	<p>8-15-16</p> <p>8-15-16</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	<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 – “l-arginine” ordered on 3/23/16 without the strength, dosage and frequency specified.</p> <p>Resident #1 – “Vytorin 10-40 mg tab take 1 tab at bedtime” ordered 6/24/16; however, the medication was not reflected on the June 2016, July 2016 and August 2016 medication records.</p>	<p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>Resident #1 - eone given obtained complete order for l-Arginine from the doctor. I put a label on the over the counter medication with the specified name, dosage, strength, frequency and route as ordered by the physician.</p>	<p>10-26-16</p>

RULE # §11-100.1-15(e)

FUTURE PLAN

USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?

10-26-16

I will read the physician's order carefully to make sure that there is a complete order with the name of drug, strength, dosage, frequency and route specified.

§11-100.1-15 Medications. (m)
All medications and supplements, such as vitamins, minerals, and formulas, when taken by the resident, shall be recorded on the resident's medication record, with date, time, name of drug, and dosage initialed by the care giver.

FINDINGS
Resident #1 – “Timoptic 0.5% oph solution 1 drop into both eyes once a day (sub with Timolol)” ordered; however, the December 2015, February 2016, March 2016, and May 2016 medication records were not initialed as taken.

Resident #1 – “Losartan potassium 25 mg take 2 tablets daily” ordered; however, the June 2016 medication record was not initialed as taken 6/24/16 to 6/30/16; the July 2016 medication record was not initialed as taken 7/6/16 to 7/31/16; and the March 2016 medication record did not reflect the time of day the medication was taken.

Resident #1 – “Gabapentin 100 mg take 1 capsule at bedtime” ordered; however, the March 2016, April 2016 and June 2016 medication records did not reflect the time of day the medication was taken.

Resident #1 – “Vytorin 10-40 mg tab take 1 tab at bedtime” ordered 6/24/16; however, the medication was not reflected on the June 2016, July 2016 and August 2016 medication records.

Resident #1 - Timoptic eye drop has been given and initialed and at the end of the day I will double check if it is initialed or not on MAR so I will not miss it again 8-15-16

Resident #1 - Losartan has already been initialed on MAR and at the end of the day I will double check so that I will not miss initialed it and Losartan also has been corrected and I will double check if the time of day given here been noted. 8-15-16

The Gabapentin of resident #1 as ordered has been corrected and I will double check each MAR so that I will not miss recording any medications there. 8-15-16

The Vytorin of resident #1 has been corrected in the MAR and I will record one line for each medication so that I will not miss any and I will double check every day that it is written & recorded. 8-15-16

Licensee's/Administrator's Signature: Delia Lampitoc

Print Name: DELIA LAMPITOC

Date: 8-15-16

Licensee's/Administrator's Signature: Delia Lampitoc

Print Name: DELIA LAMPITOC

Date: 8-16-16

Licensee's/Administrator's Signature: Delia Lampitoc

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Date: 10-16-16