

Office of Health Care Assurance

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State Licensing Section

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

STATE OF HAWAII
 BOARD OF PSYCH

Facility's Name: Annelyn Raval (ARCH)	CHAPTER 100.1
Address: 94-362 Apowale Street, Waipahu, Hawaii 96797	Inspection Date: January 7, 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 no MD order for Nateglinide 60mg 1 tab PO BID.</p>	<p>11-100.1-15 (e) Resident #1 On the 9th of this month 4-7-2016 I fixed it. To prevent the deficiencies, in the future I created a check list for medication ordered for Nateglinide 60 mg. 1 tab. PO BID.</p>	4-12-2016
		<p>11-100.1-15 (e) Resident #1 I checked over the record, Nateglinide 60mg PO BID Physician ordered Sept. 3, 2015 is corrected & enclosed copy's medication statement signed by the physician. I check & write in the med. record properly dated same same as in the progress note. (back side)</p>	5-17-2016

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications. (e)</u> 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 Levothyroxine 25mcg was signed off on MAR as being administered daily starting September 1, 2015 but wasn't ordered by MD until September 29, 2015.</p>	<p>11-100.1-15 (e) Resident #1 Levothyroxine 25 mcg. I have already fixed and I made another calendar checklist reminder to prevent deficiencies in the future.</p>	<p>4-12-2016</p>
		<p>11-100.1-15 (e) Resident #1 I check over the medication record re-write properly dated Physician ordered prescribe date as copy's on closed per Levothyroxine 25 mg $\dot{\bar{I}}$ daily and wrote in the Progress Note for documentation to prevent deficiencies in the future.</p>	<p>5-17-2016</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications. (g)</u> All medication orders shall be reevaluated and signed by the physician or APRN every four months or as ordered by the physician or APRN, not to exceed one year.</p> <p>FINDINGS Resident #1 medications ordered December 15, 2014 were not renewed until September 29, 2015.</p>	<p>11-100.1-15 (g) Resident #1 today I have already fixed. I create a reminder checklist form Quarterly Medications Update signed by the physician to prevent deficiencies in the future.</p>	<p>4-12-2016</p>
		<p>11-100.1-15 (medication (G)) Resident #1 I check the Quarterly Medications Update & corrected it already.</p>	<p>5-17-2016</p>



§11-100.1-17 Records and reports. (b)(3)
 During residence, records shall include:

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;

FINDINGS

Resident #1 September 2015 change in medications not noted in progress notes.

11-100.1-17(b)(3) Resident #1
 I have already fixed and noted
 in the progress notes to
 prevent deficiencies in
 the future.

4-12-2016

11-100.1-17(b)(3) Resident #1
 & corrected already. I will make
 checklist related to the progress
 note, diet, vitamins, medications
 changes to prevent deficiency
 in the future.

11-100.1-17(b)(3)

11-100.1-17(b)(3)

5-17-2016

<input checked="" type="checkbox"/>	<p>Records and Reports (1)(7) General rules regarding records:</p> <p>All records shall be complete, accurate, current, and readily available for review by the department or responsible placement agency.</p> <p>FINDINGS Resident #1 emergency sheets missing Levothyroxine and Nateglinide as current medications.</p>	<p>11-100.1-17(F)(4) I corrected by adding Levothyroxine 25 mg T daily, and Nateglinide 60 mg T PO BID on the Emergency sheet to prevent deficiency in the future.</p>	<p>5-17-2016</p>
	<p>11-100.7-17(F)(4) I made a checklist and a calendar reminder.</p>	<p>5-31-2016</p>	

Licensee's/Administrator's Signature: Annelyn B. Raval
 Print Name: ANNELYN B. RAVAL
 Date: 4-12-2016

Licensee's/Administrator's Signature: Annelyn B. Raval
 Print Name: ANNELYN B. RAVAL
 Date: 5-17-2016

Licensee's/Administrator's Signature: Annelyn B. Raval
 Print Name: ANNELYN B. RAVAL
 Date: 5-31-2016