Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: La'a Kea House	**CHAPTER 89**
Address: **41 Palekana Street, Paia, Hawaii 96779**	**Inspection Date: February 29, 2016 Annual**

	Rules (Criteria)	Plan of Correction	Completion Date
☒	§11-89-13 Residents' rights. (a)(1) Written policies and procedures addressing the rights of residents during their stay in the facility shall be established and shall be made available to the resident, guardian, next of kin, responsible agency, and the public. It shall be the right of each resident admitted to the facility to: Be fully informed both orally and in writing, in the language the resident understands, prior to or at the time of admission, of their rights and of all rules governing resident conduct. There shall be documentation signed by the resident or resident's legal guardian that they have been informed of their rights and have been provided a written description of such rights; **FINDINGS** For Resident #1, guardian did not sign for receipt of the information until January 29, 2016, although resident was admitted on August 1, 2015.	ATTACHMENT "A" TITLE WAS CORRECTED TO READ "WELCOME TO LAIA KEA HOUSE" AND THE FORM IS TO BE SIGNED BY A "LAIA KEA HOUSE & STAFF MEMBER". ADMISSIONS PACKET HAS BEEN MADE FOR CURRENT/FUTURE RESIDENTS WITHIN PACKET THERE IS A CHECK LIST TABLE OF CONTENTS. FORMS NEEDING SIGNATURES ARE HIGHLIGHTED IN RED. PACKET MUST BE COMPLETE BEFORE NEW RESIDENTS CAN MOVE IN. NEW ATTACHMENT "A" BEING ATTACHED TO THIS DOCUMENT. COPIES OF DOCS ATTACHED	2/23/17

	Rules (Criteria)	Plan of Correction	Completion Date
☒	§11-89-14 Resident health and safety standards. (b) Basic first aid supplies and equipment shall be available at the facility. **FINDINGS** A tube of Neosporin Ointment was found in the first aid kit.	- NEOSPORIN OINTMENT WAS IMMEDIATELY REMOVED FROM FIRST AID KIT - NEW FIRST AID KIT HAS A LIST OF APPROVED PRODUCTS AS WELL AS NOT APPROVED WRITTEN ON FRONT OF FIRST AID KIT. STAFF HAS BEEN TRAINED BY EXECUTIVE DIRECTOR REGARDING THIS MATTER	2/29/16
☒	§11-89-14 Resident health and safety standards. (d)(1) The caregiver shall develop an emergency evacuation plan to ensure rapid evacuation of the facility in the event of fire or other life-threatening situations. The plan shall be posted and shall include a provision for evacuation drills as follows: Evacuation drills shall be held at least monthly and at varied times during the twenty-four hour period. Instruction in the evacuation procedures shall be given to each new resident upon admission to the facility. **FINDINGS** No verification that a fire drill was conducted in September 2015.	FIRE DRILL VERIFICATION BOOKLET HAS BEEN UPDATED TO CLEARLY SHOW WHEN FIRE DRILLS ARE CONDUCTED WITH THE IMPLEMENTATION OF THE NEW "EVACUATION/ FIRE DRILL QUICK LOG". (SEE SUPPORTING DOCUMENTS "C" ATTACHED)	4/2/16

☒	§11-89-14 Resident health and safety standards. (d)(3) The caregiver shall develop an emergency evacuation plan to ensure rapid evacuation of the facility in the event of fire or other life-threatening situations. The plan shall be posted and shall include a provision for evacuation drills as follows: Each resident of the facility shall be certified annually by a physician that the resident is capable of self-preservation. A maximum of two residents not so certified may reside in the facility provided that a staff ratio of one-to-one is maintained, at all times, for each of these residents and there are no stairways which must be negotiated by such noncertified residents. As an alternative, the facility shall install an automatic sprinkler system, as defined in the national fire protection association's 101 life safety code. **FINDINGS** For Resident #2, the Self Preservation Statement was last completed on March 25, 2014. (NOTE: Submit a copy of a current Self Preservation Statement with your plan of correction.)	- SELF PRESERVATION STATEMENT FOR RESIDENT #2 WAS CORRECTED WITH VERIFICATION OF APPT. DATE BY CLIENT'S DOCTOR, DATE WAS THEN FILLED IN BY HOUSE PARENT WITH DOCTOR'S PERMISSION - COPY OF CORRECTED DOCUMENT ATTACHED.	4/7/16
		RESIDENT #2 HAS BEEN GIVEN A TABLE OF CONTENTS WITH CHECK BOXES FOR ALL FORMS WITH SIGNATURES. REQUIRED (REFER TO DOC. "A") ALL BOOKS HAVE BEEN UPDATED. CURRENT COPY OF S.P.S IS ATTACHED AS ATTACHMENT "D". ALSO ATTACHED	4/2/16
		ARE TEMPLATES USED FOR FUTURE RESIDENTS SELF PRESERVATION STATEMENTS (SEE ATTACHMENTS "E & F")	4/2/16

		Plan of Correction	Completion Date
☒	§11-89-14 Resident health and safety standards. (e)(1) Medications: All medicines shall be properly and clearly labeled. The storage shall be in a staff-controlled workcabinet/workcounter apart from either residents' bathrooms or bedrooms. **FINDINGS** For Resident #1, there was no pharmacy label for the Polyethylene Glycol 3350 NF (Miralax).	UNLABELED MIRALAX WAS REMOVED AND RESIDENTS DOCTOR WAS NOTIFIED; PROVIDED A PRESCRIPTION FOR PICK UP OF NEW MIRALAX (POLYETHYLENE GLYCOL 3350 NF) ~~Executive director told staff that no medications are allowed to be distributed/logged without proper labeling or documentation~~ caregivers when giving out meds ever time must check to see if pharmacy labels matches doctors orders and meds sheet. If not caregiver will follow up and make necessary correction.	2/23/17
☒	§11-89-14 Resident health and safety standards. (e)(5) Medications: All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition. **FINDINGS** For Resident #1, Nitrofurentoin 100 mg BID x 5 days was started on September 22, 2015; however, physician order was not obtained until October 1, 2015.	NEW SECONDARY MEDICATION DOCUMENT CREATED THAT REQUIRES TWO STAFF SIGNATURE FOR VERIFICATION. SEE ATTACHMENT "G"	4/2/16

11-89-14 (e)(5) attachment "g" was changed to include a column regarding "start date for change per physician's order." See column #2 on new attachment 2/23/17

☒	§11-89-14 Resident health and safety standards. (e)(6) Medications: All physician orders shall be re-evaluated and signed by the physician every three months or at the next physician's visit, whichever comes first. **FINDINGS** For Resident #1, the medication update of August 1, 2015 notes, prn Ibuprofen. The strength, dosage and frequency were not noted. For Resident #1, Miralax was not updated between August 1, 2015 and January 8, 2016.	(1) PHYISCANS THREE MONTH UPDATE TEMPLETE HAS BEEN UPDATED TO REFLECT STRENGTH / DOSAGE/FREQUENCY AS A REQUIREMENT. SEE ATTACHMENT "H" (2) NEW SECONDARY MEDICATION DOC. CREATED THAT REQUIRES TWO STAFF SIGNATURE FOR VERIFICATION SEE ATTACHMENT "6" (3) SEE ATTACHMENT "H"	4/2/16
	For Resident #1, the current list of medications of September 29, 2015 noted, Ibuprofen 600 mg tablet 1 tab(s) 4 times a day. PRN was not indicated.	staff was told by executive director to make sure all caregivers, when dispensing meds, make sure pharmacy labels match dr. orders and med sheets and if discrency noted, then caregiver will follow up with physician. Before leaving doctors office, caregivers must go over physicians orders for medications to make sure completed.	2/23/17

☒	§11-89-14 Resident health and safety standards. (e)(12) Medications: All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver. **FINDINGS** For Resident #1, the January 8, 2016 medication update notes, 60 mg Ibuprofen as needed. The January 2016 and February 2016 medication records note, 60 mg Ibuprofen. The pharmacy label of April 10, 2015 notes, Ibuprofen 600 mg tablet, take 1 tab every 6 hours as needed. For Resident #1, the dosage and frequency were not indicated for all medications listed on the medication record sheets. For Resident #1, the times medications were given were not indicated on the August 8-31, 2015 and September 2015 – February 2016 medication record sheets. For Resident #1, no verification that Norethindrone 5 mg tablet was given on November 22, 2015 in the pm. For Resident #1, medication update of January 8, 2016 notes, Miralax 6 oz pm. No verification that Miralax was given on January 3, 2016, January 5-7, 2016, January 10-13, 2016, January 19, 2016, January 22-23, 2016, January 31, 2016, February 6-7, 2016, February 9, 2016, February 11-14, 2016, February 20-21, 2016 and February 25-28, 2016. For Resident #1, Venlafaxine HCL ER 37.5 mg, take 1 cap by mouth once a day was dispensed on February 20, 2016; however, the February 2016 medication record notes the strength as 75 mg. For Resident #1, the August 1, 2015 medication update notes, Venlafaxine 75 mg qd (1x day); however, the August 2015 medication record notes, Venlafaxine 150 mg. For Resident #1, there was no verification that the Lamictal 100 mg tablet (8 pm dose) was given on August 6, 2015.	NEW SECONDARY MEDICATION DOCUMENT CREATED THAT REQUIRES TWO STAFF SIGNATURES FOR VERIFICATION SEE ATTACHMENT "G" MEDICATION SHEETS NO LONGER INDICATE ONLY AM OR PM, BUT RATHER THE SPECIFIC TIME GIVEN AND WILL BE DISTRIBUTED WITHIN APPROPRIATE TIME FRAME AT COMPLETION OF DAILY SHIFT, DEPARTING HOUSE STAFF WILL VERIFY MEDICATION RECORD SHEETS FOR COMPLETION OR ERROR, THIS WILL HAPPEN DAILY, AT THE END OF THE NIGHT, WHEN FINAL PILLS HAVE BEEN DISTRIBUTED. MEDICATION RECORDS WILL BE RECORDED AND LOGGED ANY TIME MEDICATION IS DISTRIBUTED; STAFF HAVE BEEN TRAINED ON ALL THE ABOVE MATTER AND HOW TO PROPERLY DOCUMENT MEDIATION. Staff have been trained by the executive director on all the above matters.	2/23/17

	For Resident #1, no verification that Miralax, which was ordered on August 1, 2015, was given from August 1, 2015 – August 8, 2015. For Resident #1, physician ordered Zyrtec 10 mg 1 tablet po qd prn on August 15, 2015; however, medication was not listed on the August 2015 medication record sheet. For Resident #1, Fluconazole 150 mg oral tablet, 1 tab po qd x 1 was ordered on October 1, 2015; however, it was not reflected on the medication record.		
☒	§11-89-15 Recreational and social activities. (b) The caregiver shall provide and document social and recreational activities for residents on a regular basis and shall encourage participation in activities according to the resident's interest, needs, capabilities, and service plan. **FINDINGS** For Resident #1, there was no documentation regarding resident's social and recreational activities from August 1, 2015 to December 2015.	SEE ATTACHMENT "A" AT COMPLETION OF SUNDAY SHIFT, HOUSE STAFF WILL INSPECT EACH BOOK AND UPDATE PROGRESS NOTES AS NEEDED. SEE ATTACHMENT "I"	4/2/16
☒	§11-89-17 General operational policies. (b) Upon admission, there shall be written documentation that the resident, guardian, or next of kin was fully informed of policies governing the resident's care.	SEE ATTATCHMENT "A", SIGNATURES REQUIRED PRIOR TO MOVE IN ARE HIGHLIGHTED IN RED. IN THE FUTURE, PROSPECTIVE RESIDENTS AND THEIR GUARDIANS WILL BE NOTIFIED	2/23/17
	FINDINGS For Resident #1, admitted on August 1, 2015, receipt of the policies governing resident's care was not signed by the guardian until January 29, 2016.	THAT ALL PAPERWORK AND SIGNATURES NEEDED WILL BE REQUIRED BEFORE RESIDENT MOVES INTO LA'AKEA HOUSE SEE ATTACHMENT "L"	

☒	§11-89-18 Records and reports. (a)(2) Individual records shall be maintained for each resident. Upon admission or readmission, the facility shall maintain: A report of a medical examination current to within nine months and current diagnosis, physician's orders for medication, diet, special appliances and equipment, treatment, evaluations or direct service to be provided by a physical therapist, occupational therapist, or speech pathologist and a report of an examination for tuberculosis performed within the year prior to admission, height and weight and medical history; **FINDINGS** For Resident #1, admitted on August 1, 2015, the physical examination was not done until September 29, 2015. For Resident #1, there was no verification of a 2-step TB skin test upon admission on August 1, 2015. TB skin tests on file are dated March 6, 2015 and February 15, 2016.	- SEE ATTACHMENT "A" CHECKLIST TABLE OF CONTENTS NEEDING SIGNATURES ARE HIGHLIGHTED IN RED AND MUST BE COMPLETE BEFORE MOVE IN. - ALL POTENTIAL RESIDENTS AND THEIR GUARDIANS WILL BE NOTIFIED IN ADVANCE THAT ALL DOCUMENTATION, FORMS, AND SIGNATURES ARE REQUIRED PRIOR TO MOVE-IN AND MOVE IN WILL BE POSTPONED OR DENIED WITHOUT THESE REQUIRED DOCUMENTS. SEE ATTACHMENT "L"	2/23/17
☒	§11-89-18 Records and reports. (b)(1) During residence, records shall be maintained by the caregiver and shall include the following information: Copies of physician's initial, annual and other periodic examinations, evaluations, medical progress notes, relevant laboratory reports, and a report of re-examination of tuberculosis;	- Documents need to be current before residents move in, then monthly checks by caregivers will be done to ensure that all physical exams and TB tests are continously up to date for all residents. If not - follow up with doctor.	2/23/17
	FINDINGS For Resident #2, the physical examination on file is dated March 25, 2014 and TB skin tests were dated August 2, 2011 and August 9, 2011. Evidence of current clearances was not on file. (NOTE: Submit a copy of a current physical examination and TB skin test with your plan of correction.)	SEE ATTACHMENT "D" FOR PHYSICAL SEE ATTACHMENT "J" FOR CURRENT TB CLEARANCE	

☒	§11-89-18 Records and reports. (b)(2) During residence, records shall be maintained by the caregiver		
	and shall include the following information: Observations of the resident's response to medication, treatments, diet, provision of care, response to activities programs, indications of illness or injury, unusual skin problems, changes in behavior patterns, noting the date, time and actions taken, if any, which shall be recorded monthly or more often as appropriate but immediately when an incident occurs; **FINDINGS** For Resident #1, Ibuprofen 600 mg was given on December 8, 19 and 20, 2015 and on February 22, 2016; however, there were no corresponding caregiver entries to explain why the medication was given and resident's response to the medication. (1) For Resident #1, caregiver entries were not written from August 1, 2015 – December 31, 2015. (2)	(1) A NEW DOCUMENT WILL BE IN EACH BOOK THAT WILL BE USED FOR REMINDING CAREGIVERS TO MAKE NOTES WHEN AN "AS NEEDED" MEDICATION IS USED. SEE ATTACHMENT "K" (2) AT COMPLETION OF SUNDAY SHIFT, HOUSE STAFF WILL INSPECT EACH BOOK AND UPDATE PROGRESS NOTES AS NEEDED. SEE ATTACHMENT "I"	4/2/16 4/2/16
☒	§11-89-18 Records and reports. (e)(1) General rules regarding records: All entries in the resident's records shall be written in blue or black ink, or typewritten, shall be legible, dated, and signed with full signature and title by the individual making the entry; **FINDINGS** For Resident #1, entries of January 6, 2016, January 30, 2016 and February 2, 2016, were not signed by the caregiver writing the entries. (1) For Resident #1, red ink was used on all the medication record sheets.	(1) PROGRESS NOTES FORM NOW STATES "MUST BE SIGNED" TO AVOID ANY CONFUSION. SEE ATTACHMENT "I", AT COMPLETION OF SUNDAY SHIFT HOUSE STAFF WILL INSPECT EACH BOOK + UPDATE + LOOK FOR ERRORS. (2) ALL RED PENS HAVE BEEN REMOVED FROM HOUSE. BLACK PEN HAVE BEEN PLACED ALONGSIDE MEDICATION CHARTS. STAFF HAVE BEEN EDUCATED RE NO RED PENS.	4/2/16 4/2/16

☒	§11-89-19 Nutrition. (e) Refrigerators shall be equipped with an appropriate thermometer and temperature shall be maintained at 45°F or lower. **FINDINGS** There was no thermometer in the refrigerator.	- Thermometer placed in side drawer of refrigerator. - staff has been trained by executive director to never remove thermometer and to regularly check that temp. is correct.	2/23/17

Licensee's/Administrator's Signature: Phyllis O'Reilly

Print Name: Phyllis O'Reilly

Date: 4/10/16

Licensee's/Administrator's Signature: Phyllis O'Reilly

Print Name: Phyllis O'Reilly

Date: 2/23/17