

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Benchmark Behavioral Health System, Inc.	CHAPTER 98
Address: 2501 Waimano Home Road, Pearl City, Hawaii 96732	Inspection Date: August 9, 2017 Annual

THIS PAGE MUST BE SUBMITTED WITH YOUR PLAN OF CORRECTION. IF IT IS NOT, YOUR PLAN OF CORRECTION WILL BE RETURNED TO YOU, UNREVIEWED.

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-10 <u>Minimum standards for licensure; administrative and organizational plan.</u> (e) Each facility shall develop written policies and procedures, and criteria governing its management and operations. These shall include but are not limited to the following:</p> <p>FINDINGS Resident #1 physician prescribed medications were not available in the facility at the time of inspection.</p> <ol style="list-style-type: none"> 1) Fexofenadine HCL 60mg 2) Almacone Liquid 30ml 3) Milk of Magnesia 30ml 4) Chapstick 	<p style="text-align: center;">PART 1 <u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p style="text-align: center;">USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>On the day of the finding an internal audit was conducted, and all missing medications for existing orders were filled, to address the finding.</i></p> <p><i>At the next nurses' meeting, all RN's were reminded of the policy - Safe Storage of Medications - that says regular audits by the charge nurse of all medications is to be conducted to ensure that all prescribed medications are available.</i></p>	<p><i>08/09/17</i></p> <p><i>09/15/17</i></p>

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<input checked="" type="checkbox"/>	<p>§11-98-10 <u>Minimum standards for licensure: administrative and organizational plan.</u> (e) Each facility shall develop written policies and procedures, and criteria governing its management and operations. These shall include but are not limited to the following:</p> <p>FINDINGS Expired medication, Hydroxyzine 25mg found in medication cart.</p>	<p style="text-align: center;">PART 1 <u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p style="text-align: center;">USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>On the day of the finding, the expired medication was removed from the medication cart and disposed of in the biohazard container.</p> <p>That same day the expired medication was replaced by a current one.</p> <p>At the next nurses meeting, all RNs reviewed the Safe Storage of Medications policy to ensure that expired medications are disposed of in a safe and timely manner.</p>	<p>08/09/17</p> <p>08/09/17</p> <p>09/15/17</p>

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<input checked="" type="checkbox"/>	<p>§11-98-14 <u>Physical facility.</u> (c) Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.</p> <p><u>FINDINGS</u> Bedroom #2 and #3 window crank not working.</p>	<p style="text-align: center;">PART 1 <u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p style="text-align: center;">USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>Two window crank assemblies were ordered through an international supplier</p> <p>Receipt of order reported a month time frame for delivery</p> <p>Upon delivery, the window cranks will be installed.</p> <p>All these actions are the responsibility of the Facility Manager</p>	<p>09/27/17</p> <p>10/27/17(?)</p>

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Licensee's/Administrator's Signature: Stephen R. Blotzke
Print Name: Stephen R. Blotzke
Date: 10/18/2017