

Office of Health Care Assurance


State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Balico's	CHAPTER 100.1
Address: 91-1204 Kauiki Street, Ewa Beach, Hawaii 96706	Inspection Date: September 27, 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>§11-100.1-15 <u>Medications.</u> (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p><u>FINDINGS</u> Bedroom #3, physician prescribed ammonium lactate found on resident dresser next to bed.</p>	<p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>Medication, Ammonium Lactate found on residents dresser was immediately removed and stored in a staff controlled medication cabinet.</p>	<p>12/20/17</p>

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<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p><u>FINDINGS</u> Bedroom #3, physician prescribed ammonium lactate found on resident dresser next to bed.</p>	<p style="text-align: center;">PART 2 <u>FUTURE PLAN</u></p> <p style="text-align: center;">USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p><i>A stop sign will be posted in each residents room to remind caregivers to always collect medications/treatment supplies before leaving the room.</i></p> <div style="text-align: center;">  </div>	<p style="text-align: right;"><i>2/7/18</i></p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<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><u>FINDINGS</u> Bedroom #1, paint and plaster peeling from window sill.</p>	<p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p>Paint and plaster noted to be peeling from window sill was immediately repaired. (please see attached invoice).</p>	<p>12/20/17</p>

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<input checked="" type="checkbox"/>	<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><u>FINDINGS</u> Bedroom #1, paint and plaster peeling from window sill.</p>	<p style="text-align: center;">PART 2 <u>FUTURE PLAN</u></p> <p style="text-align: center;">USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p style="text-align: center;">maintain a Logbook for annual or regulatory building inspection and weekly visual checks. Logbook shall be placed in an open readily visible + conspicuous, such as working desk, to remind me to check around the house regularly and make entry + said logbook.</p>	<p style="text-align: center;">2/17/18</p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<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><u>FINDINGS</u> Bathroom #1, paper towel dispenser not functioning. No paper towels in bathroom next to hand washing sink.</p>	<p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>In place of the dispenser I provided a roll of paper towel next to the hand washing sink in bathroom. A stock of paper towels is readily available for replacement.</i></p>	<p><i>12/20/17</i></p>

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<input checked="" type="checkbox"/>	<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><u>FINDINGS</u> Bathroom #1, paper towel dispenser not functioning. No paper towels in bathroom next to hand washing sink.</p>	<p style="text-align: center;">PART 2 <u>FUTURE PLAN</u></p> <p style="text-align: center;">USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p>An exclamation point sign will be posted above paper towel dispenser in the common bathroom to remind caregivers to check dispenser when cleaning bathroom and replacing paper towel daily and as needed.</p> <div style="text-align: center;">  </div>	<p style="text-align: right;">2/7/18</p>

Licensee's/Administrator's Signature: lbalico

Print Name: LETICIA BALICO

Date: 12/20/17

Licensee's/Administrator's Signature: lbalico

Print Name: LETICIA BALICO

Date: 2/7/18