

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

|   |   |
|---|---|
| <b>Facility's Name: F. Glenish J. Caraang (DDDH)</b>          | <b>CHAPTER 89</b>                             |
| <b>Address:<br/>94-477 Lianu Place, Waipahu, Hawaii 96797</b> | <b>Inspection Date: April 21, 2017 Annual</b> |

**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>11-89-14 <u>Resident health and safety standards.</u> (e)(12)<br/>Medications:</p> <p>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.</p> <p><b><u>FINDINGS</u></b><br/>For Resident #1, the medication updates of November 22, 2016 and December 12, 2016 notes, Gentamicin 0.1% Ointment, apply thinly BID to open wounds PRN; however, the November 2016 - January 2017 medication records note, apply to open wounds PRN.</p> | <p>PART 1</p> <p><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p> | <p>4/22/17</p>  |

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| <input checked="" type="checkbox"/> | <p>11-89-14 <u>Resident health and safety standards.</u> (e)(12)<br/>Medications:</p> <p>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.</p> <p><b><u>FINDINGS</u></b><br/>For Resident #1, the medication updates of November 22, 2016 and December 12, 2016 notes, Gentamicin 0.1% Ointment, apply thinly BID to open wounds PRN; however, the November 2016 - January 2017 medication records note, apply to open wounds PRN.</p> | <p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR<br/>FUTURE PLAN: WHAT WILL YOU DO TO<br/>ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>Caregiver will make sure to review all doctor's notes that were given and signed by Resident #1 PMD before leaving the doctor's office. When caregiver returns home Caregiver will make necessary changes to the MAP so that it reflects current PMD changes to medications. Caregiver will than check medication labels if labels for medications are wrong and does not match with MAR, Caregiver will call PMD to make the necessary changes to the medication label.</p> | <p style="text-align: right;">April 22 2017</p> |

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|-------------------------------------|--|---|-------------------|
| <input checked="" type="checkbox"/> | <p>11-89-14 <u>Resident health and safety standards.</u> (e)(12)<br/>Medications:</p> <p>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.</p> <p><b><u>FINDINGS</u></b><br/>For Resident #1, the pharmacy label of April 4, 2017 notes, Gentamicin 0.1% Ointment, apply as needed to open wounds, which is consistent with the April 2017 medication record. The physician order of April 4, 2017; however, notes Gentamicin 0.1% Ointment, apply thinly BID to open wounds PRN.</p> | <p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>Resident #1, the pharmacy label of April 4 2017 notes, Gentamicin 0.1% Ointment apply PRN to open wounds. was consistent with the April 2017 medication record. However, physician order on April 4 2017, apply thinly BID to wounds PRN. Caregiver informed PMP during Resident #1 3 month's visit. PMP corrected the frequency order for Gentamicin 0.1% Ointment, apply thinly BID to open wounds PRN, to reflect the pharmacy label and medication sheet.</p> | <p>May 31/17.</p> |

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Licensee's/Administrator's Signature: Francisco Glenish Comas  
Print Name: F. Glenish J. Comas  
Date: Nov. 15 2017.

Licensee's/Administrator's Signature: Francisco Comas  
Print Name: F. Glenish J. Comas  
Date: 2/23/18