


Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Manoa Elder Care, L.L.C.	CHAPTER 100.1
Address: 2870 Oahu Avenue, Honolulu, Hawaii 96816	Inspection Date: January 24 and 25, 2018 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>§11-100.1-23 <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 #4 window screen is broken.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><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>MSC = Manoa Senior Care</p> <p>The screen in bedroom #4 was fixed on 1/29/18. Each resident room is scheduled for thorough cleaning once a week. The MSC Facility Maintenance Director reviewed with all staff in the home:</p> <ul style="list-style-type: none"> A full inspection of the resident's room should be done during the weekly cleaning. A process is in place where the house supervisor (primary day shift nurse aide in the home) is able to report any identified maintenance needs to the main office as they come up, and will be scheduled to be fixed timely. 	<p>1/29/18 + ongoing </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 #4 window screen is broken.</p>	<p style="text-align: center;">PART 2</p> <p style="text-align: center;"><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>The MSC Facility Maintenance Director will do periodic visits to the home and will be able to identify maintenance needs at that time and schedule repairs/cleaning.</p>	<p style="text-align: center;"><i>ongoing</i></p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	<p>§11-100.1-23 <u>Physical environment.</u> (i)(4)(A) All construction or alterations shall comply with current county building, land use and fire codes and ordinances in the state. The Type I ARCH licensed for wheelchair residents shall be accessible to and functional for the residents at the time of licensure.</p> <p>Lighting:</p> <p>Appropriate lighting fixtures adequate in number shall be provided for the comfort of residents and care givers;</p> <p><u>FINDINGS</u> Bedroom #2 bathroom light bulb is not functioning.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><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>The bedroom light in bedroom #2 was fixed on 1/29/18. Each resident room is scheduled for thorough cleaning once a week. The MSC Facility Maintenance Director reviewed with all staff in the home:</p> <ul style="list-style-type: none"> A full inspection of the resident's room should be done during the weekly cleaning. A process is in place where the house supervisor (primary day shift nurse aide in the home) is able to report any identified maintenance needs to the main office to be scheduled if they are unable to fix or manage it. 	<p style="text-align: center;">1/29/18 r. <i>ongoing</i></p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (i)(4)(A) All construction or alterations shall comply with current county building, land use and fire codes and ordinances in the state. The Type I ARCH licensed for wheelchair residents shall be accessible to and functional for the residents at the time of licensure.</p> <p>Lighting:</p> <p>Appropriate lighting fixtures adequate in number shall be provided for the comfort of residents and care givers;</p> <p><u>FINDINGS</u> Bedroom #2 bathroom light bulb is not functioning.</p>	<p style="text-align: center;">PART 2</p> <p style="text-align: center;"><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>The MSC Facility Maintenance Director will do periodic visits to the home and will be able to identify maintenance needs at that time and schedule repairs/cleaning.</p>	<p style="text-align: center;"><i>anytime</i></p>

Licensee's/Administrator's Signature: My-

Print Name: Robert Noyami

Date: 1/30/18