

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<b>Facility's Name: The Exclusive Addiction Treatment Center</b>	<b>CHAPTER 98</b>
<b>Address: 45-3514 Paauhau Road, Honokaa, Hawaii 96727</b>	<b>Inspection Date: November 3, 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>§11-98-05 <u>Dietetic services.</u> (c) Menus and food service shall meet the nutritional needs of the residents.</p> <p><b><u>FINDINGS</u></b> No documentation that the menus meet the nutritional needs of the residents as there are no portion sizes listed on the menu.</p>	<p style="text-align: center;"><b>PART 1</b> <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>Being that our Kitchen manager drafted a menu for all of 2017 we were able to look back and get portion amounts to review with our dietitian to ensure proper amounts. A new menu format was drafted w/ Kitchen Manager, staff and dietitian at our Kitchen meeting.</p>	<p style="text-align: center;">12/15/17</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><b><u>FINDINGS</u></b>            The Exclusive Addiction Treatment Center Policy and Procedure Manual entitled: "Medication Documentation" #2 read, "Medication record sheets will list the medications that are ordered by the Physician." However, Resident #1 supplement record for October 10, 2017 did not list the following supplement: "Super Aloe 250 mg 1 by mouth qHS," prescribed on October 8, 2017.</p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p style="text-align: center;">3/1/18</p>

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<input checked="" type="checkbox"/>	<p>§11-98-14 Physical facility. (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><b>FINDINGS</b> The pool chlorine levels were 0 parts per million for a number of days with no corrective action taken.</p>	<p style="text-align: center;"><b>PART 1</b> <b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;">Yes</p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>The director immediately spoke with the contracted pool professional whom admitted that he stopped documenting thoroughly except in his personal notebook and he stopped double checking the nightly pool and spa testing charts. He claimed to have been correcting pH issues without properly documenting. He was released from his duties immediately as a result.</p> <p>In addition, we found that the test strips being used were an old container of ones that don't read correctly mixed with a newer container and a staff person admitted to mixing the container which explained the different readings on the same day in several instances, and specifically the 0 readings. We disposed of these test strips and replaced all of them immediately.</p> <p>On the same day as the OHCA inspection, the director made contact with Jeff Klohs and he was at the center the following day. We reviewed all data and regulations; and paired him with our maintenance manager to ensure that corrections are monitored and made daily.</p> <p>There have been no further problems.</p>	<p style="text-align: center;">11/3/17</p>

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<input checked="" type="checkbox"/>	<p>§11-98-16 <u>Resident's rights and responsibilities.</u> (1)  Written policies regarding the rights and responsibilities of residents and services to be provided to residents during their stay in the facility shall be established and shall be made available to the resident, to any guardian, next of kin, sponsoring agency or representative payee, and to the public. The facility's policies and procedures shall provide that each individual admitted to the facility shall:</p> <p>Be fully informed, documented by signed acknowledgment prior to or at the time of admission and during stay, of these rights and of all rules governing resident conduct;</p> <p><b><u>FINDINGS</u></b>  Resident #3, consent for treatment form was signed; however, form was not dated.</p>	<p style="text-align: center;"><b>PART 1</b>  <b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><i>Yes</i>  <b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p style="text-align: center;"><i>The Admission Date was verified and added to the form.</i></p>	<p style="text-align: center;"><i>11/3/17</i></p>



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Licensee's/Administrator's Signature: 

Print Name: Leslie K. Purdy-Rivera

Date: 1/16/18