

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Alaag, L.L.C. ARCH	CHAPTER 100.1
Address: 94-1032-A Lumikula Street, Waipahu, Hawaii 96797	Inspection Date: June 29, 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>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (a)  All individuals who either reside or provide care or services to residents in the Type I ARCH, shall have documented evidence that they have been examined by a physician prior to their first contact with the residents of the Type I ARCH, and thereafter shall be examined by a physician annually, to certify that they are free of infectious diseases.</p> <p><b><u>FINDINGS</u></b>  SCG #5 – No annual physical examination.</p>	<p style="text-align: center;"><b>PART 1</b>  <u><b>DID YOU CORRECT THE DEFICIENCY?</b></u></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p><i>I am unable to correct the deficiency for SCG 5 is out of contact. She went to retire in the Phil.</i></p>	<p>12/3/17</p>

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<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (a) All individuals who either reside or provide care or services to residents in the Type I ARCH, shall have documented evidence that they have been examined by a physician prior to their first contact with the residents of the Type I ARCH, and thereafter shall be examined by a physician annually, to certify that they are free of infectious diseases.</p> <p><b><u>FINDINGS</u></b> SCG #5 – No annual physical examination.</p>	<p style="text-align: center;"><b>PART 2</b> <b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>To prevent the deficiency from recurring is to make a CHECKLIST for me and SCGs Physical Exam and to check quarterly for its update. To make a TO DO LIST as a reminder so as not to forget at least two months before the PE annual exam is due</p>	<p style="text-align: right;">4/5/18</p>

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	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (b) All individuals who either reside or provide care or services to residents in the Type I ARCH shall have documented evidence of an initial and annual tuberculosis clearance.</p> <p><b>FINDINGS</b></p> <ol style="list-style-type: none"> <li>1. No documented evidence of an initial tuberculosis clearance for PCG, SCG #1, SCG #2, SCG #3, and SCG #4.</li> <li>2. No annual tuberculosis clearance for SCG #4.</li> <li>3. SCG #5 – TB screening completed; however, no documentation of positive TB conversion.</li> </ol>	<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>1) Evidence of initial tb clearance for PCG, SCG 1 &amp; 2 including step 2 that's taken today is documented &amp; will be on file Current tb clearance for SCG 3 &amp; 4 is unavailable as she refused to provide. Accdg. to her, since she opened her DDIAF last Oct. 2017, she's complying w/ their rules that they're not allowed to work or sub to any facilities. At 1st she wasn't hesitant, promised to provide these docs until 1/26/18 that Lanakila HC <sup>scheduled</sup> gave her to pick up these docs. Called her to obtain these docs, she changed mind for her reason above.</p> <p>2) Can't provide the SG &amp; current annual tb clearance for the same reason.</p>	<p style="text-align: right;">1/30/18</p> <p style="text-align: right;">1/29/18</p>

SCG # 3 tb # is [REDACTED] if you  
want more info about her refusal of  
sharing their tb clearances

3) Documentation of + TB conversion  
for SCG #5 can't be provided for she's  
out of town. She went to retire in the  
Phil.

12-1-00

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	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (e)(4) The substitute care giver who provides coverage for a period less than four hours shall:</p> <p>Be trained by the primary care giver to make prescribed medications available to residents and properly record such action.</p> <p><b><u>FINDINGS</u></b> No documentation that the PCG trained SCG #1, SCG #2, SCG #3, SCG #4, or SCG #5 on how to make prescribed medications available to residents.</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>The in-service training for SCGs on how to make prescribe medicine available to Residents that I give has been documented.</p>	<p style="text-align: center;">7/30/17</p>

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	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 – Cetirizine/Pseudoephedrine and Voltaren 1% gel on 5/9/2017 medication orders; however, not available.</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>I informed the PCP that the medicine he prescribed is not covered by the Res. drug plan, if he can prescribe a generic medicine instead. The PCP discontinued the med &amp; documented in his note. No medicine was prescribed for the Res. was already well.</p>	<p style="text-align: center;">6/29/17</p>

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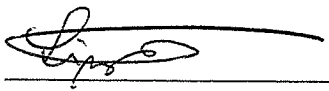
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Licensee's/Administrator's Signature: 

Print Name: LINDA GUTING

Date: 4/5/18

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