

Hawaii Dept. of Health, Office of Health Care Assurance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 12G042	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/12/2019
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NAME OF PROVIDER OR SUPPLIER OPPORTUNITIES AND RESOURCES, INC (HOL	STREET ADDRESS, CITY, STATE, ZIP CODE 64-1510 KAMEHAMEHA HIGHWAY WAHIAWA, HI 96786
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9 000	INITIAL COMMENTS	9 000		
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A relicensure survey was conducted by the Office of Health Care Assurance at this facility on April 10, 2019 to April 12, 2019. There were three (3) clients in the home with a sample of 3 clients. A fundamental survey was completed. The facility is equipped with five (5) beds

9 072	11-99-7(l)(1) CONSTRUCTION REQUIREMENTS	9 072		
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Locked space shall be provided for janitor's supplies and equipment. This Statute is not met as evidenced by: Based on observation and interview the facility was non-compliant with applicable provisions of State laws, regulations and codes pertaining to safety.

Findings include:

During an observation on 04/10/19 at 03:00 PM a cabinet was found to be left unlocked and contained chemicals (bleach) inside. An open padlock was noted in the latch. At 03:30 PM Staff (S)4 went to open the lock with the keys and found the padlock unlocked stating this cabinet should be locked, someone must have got something out and forgot to lock it. Locked storage space shall be provided for janitor's supplies and equipment.

9 081	11-99-9(a) DIETETIC SERVICES	9 081		
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The food and nutrition needs of residents shall be met through a nourishing, well-balanced diet in accordance with the recommended dietary allowances of the Food and

The caregivers were advised to lock the cabinets at all-time. The CM's will check at least monthly to ensure cabinets are locked at all-times. 04/12/19

RECEIVED
 19 MAY 31 A10:04
 STATE OF HAWAII
 DEPARTMENT OF HEALTH
 MEDICARE CERTIFICATION

Office of Health Care Assurance
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Susanna F. Cheung

TITLE
President/CEO

(X6) DATE
05/29/19

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9 081	<p>Continued From page 1</p> <p>Nutrition Board of the National Research Council adjusted for age, sex, activity, and disability. This Statute is not met as evidenced by: Based on observation, interviews and record reviews, the facility failed to ensure that three (3) of three (3) clients in the sample received a diet prepared in accordance with the latest edition of the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences, adjusted for age, sex, disability and activity. (Clients 3)</p> <p>Findings include:</p> <p>Observation made on 04/11/19 at 0550 AM, staff (S)1 was prepping breakfast. Residents sat at the table while S1 set the table and prepped breakfast. Breakfast consisted of three cup of noodle which was poured into hot water. Water and orange juice was placed on breakfast table by S1. Planned breakfast menu on the wall was noted to be according to planned menu was noted to be cereal with milk, apple, banana and orange juice and water. No substitutional foods were documented or available.</p> <p>Interview with S5 on 04/11/19 at 11:25 AM stated that "they can substitute foods like saimin but they have to put vegetables and meat inside." S5 was informed that there were no meat or vegetables in the saimin. The question was also asked if saimin noodles is an appropriate breakfast and S5 was surprised that clients were served saimin for breakfast.</p> <p>Interview with S8 on 04/12/19 at 01:30 PM who was informed of breakfast served on 04/11/19 who stated "thank you for informing me of this. I have my work cut out for me." (ref 462)</p>	9 081	<p>All caregivers including the CM who is preparing the monthly menus receives in-service training by the Dietician on how to prepare a healthy snack, lunch and dinner. They were advised to make sure and follow the menu for the day, if not available, substitution is okay but make sure to write it in the menu sheet.</p> <p>The caregivers were advised to read their clients annual nutritional assesement so that they will know the diet of their client and they will know what kind food to serve with them, especially those who are diabetic and controlled carbohydrate.</p> <p>During the in-service training, staff asked the dietician if it's okay to serve saimin, the dietician said it's okay for as long as they will add vegetables and meat for a good breakfast balance.</p> <p>The CM's, QIDP's and nurses will continue to check the menu at least monthly to ensure good and healthy snack and breakfast are being serve and menus are being followed.</p>	05/14/19
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9 081	Continued From page 2 2) During an observation in the home on 04/10/19 at 03:30 PM Client's (C) 1,2,3 were offered unsalted white crackers and orange juice. Staff (S)4 placed the crackers and orange juice on the table for the clients to help themselves instead of placing measured portions to each of the clients. C3 was observed to eat 3 servings of crackers with the orange juice. During the dinner observation in the dining room on 04/10/19 at 05:00 PM the meal consisted of one breaded chicken patty, steamed white rice and canned peas. Client (C)1's dinner plate had one chicken patty with two scoops of rice, one cup of strawberry jello and no vegetable. C2's plate had two chicken patty's with two scoops of rice, peas and 1 bowl of jello. A record review for C2's nutritional assessment dated 06/25/19 revealed the Dietician recommended that C2 continue on a controlled carbohydrate diet limit portion sizes, 2nd servings and snacks. Calorie free or sugar free beverages such as water or Crystal light should be offered. Lower carbohydrate items and diabetic appropriate snacks discussed with care givers. During an interview with S6 on 04/11/19 at 12:00 PM stated the house menu's are rotated every three months. The restaurant has their own menu for the lunch and dinner meals. S6 stated he wasn't aware that the menus were not being followed in the home or in the restaurant. Review of the restaurant dinner menu for 04/10/19 stated BBQ Meat Balls, rice, seasoned corn and pears was listed on the menu with following portion sizes in the bottom left corner:	9 081	

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9 081	<p>Continued From page 3</p> <p>Meat - (2 1/2 oz), Veg./Fruit- (2 1/2 cups), Starch- (1/2 cup), Soup-(1/2 cup), Water and Ice tea.</p> <p>Review of the home's afternoon snack menu included non-nutritious items like cheetos and sprite; Oreo and Soda; Banana cookies and juice. Ice cream and juice.</p> <p>Review of the Food and Nutritional service policy statesThe residential staff will provide a nourishing, well balanced diet to clients, including.....</p> <p>During an interview with the contracted Dietician on 04/12/19 at 01:30 PM stated her responsibilities include in-service training to staff on therapeutic diets, signs & symptoms of hypo and hyperglycemia. I also provide consultation on a client if there is a nutritional concern. The restaurant provides the lunch and dinner meals to the clients and makes their own menus. I don't have control over the menus and have asked them to incorporate brown rice instead of white rice but they said they can't provide brown rice. I have not recently looked at the menu because it doesn't matter what you put on the menu if they don't follow it. (ref 466)</p>	9 081		
9 100	<p>11-99-9(d)(3)(G) DIETETIC SERVICES</p> <p>If the food service is directed by a person other than a qualified dietitian, there shall be consultation by a dietitian or public health nutritionist. Consultation, training, and in-service education shall be appropriate to staff and patient needs and shall be documented. This Statute is not met as evidenced by:</p>	9 100		

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9 100 Continued From page 4 9 100

Based on observation and interview the facility does not have a designated food service director in collaboration with the Dietary consultant.

Findings include:

During an interview with Staff (S)5 on 04/11/19 at 11:29 AM stated that the Registered Dietician is contracted part time and identified the designated Food services director as S6.

During an interview with S6 on 04/11/19 at 12:00 PM stated that he wasn't aware that he was the designated Food services director and is currently working as the case manager for the day program and volunteered to help out with the menus while the House Manager is on vacation. He rotates the menus every three months. He stated that he has not consulted with the contracted Dietician to develop individual meal plans and monitor client nutritional status although he attended the annual food safety and nutrition in-service training. (ref W466)

The CM who is volunteering to prepare menus for lunch and dinner receives training on how to prepare a healthy menu from the dietician. The program team will continue to monitor the menu to make sure it is being followed by the kitchen cooks.

05/14/19

9 174 11-99-20(b)(2) NURSING SERVICES 9 174

In facilities with residents certified by a physician as not needing nursing services, arrangements shall be made with a qualified outside resource to provide at least the following:

Consultation and staff training with regard to the maintenance of the health and hygiene of each resident. This Statute is not met as evidenced by: Based on observation, interview and record review, the facility failed to train staff as needed in

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9 174	<p>Continued From page 5</p> <p>appropriate health and hygiene methods.</p> <p>Findings include:</p> <p>1) During an observation on 04/10/19 at 05:00 PM two staff were observed wearing gloves and not wearing hairnets while serving the clients the dinner meal at the buffet line. Two other staff who were not wearing gloves or hairnets were placing food on plates at the buffet and taking them to the clients who were sitting at the tables. The staff did not sanitize their hands before, or after placing the food on the plate and after taking it to the client.</p> <p>During an interview with Staff (S)5 on 04/11/19 at 11:15 AM stated that any staff member who is serving food to the clients should be wearing aprons, hairnets and gloves.</p> <p>Record Review (RR) included Good Hygiene basics staff training content, Good personal hygiene habits include:... washing hands with soap before preparing and/ or eating food. If the germs are not washed off before preparing food or eating, they may get onto the food. Food safety reference card staff training content reviewed, Personal hygiene... Wash hands before starting work, after using restroom, before putting on gloves, when changing tasks, after eating, and whenever hands become contaminated. Review of the basic food safety sign in sheet indicated staff were trained on 07/17/18 by the Dietician.</p> <p>2) During an observation on 04/10/19 at approximately 06:00 PM, the bathroom in the lounge was found with no hand soap. Outside the door a large bottle of hand sanitizer was placed on a cabinet. Two clients were observed at different times coming out of the bathroom and</p>	9 174	<p>Hairnets were already purchased. 04/13/19 The staff were advised to always use gloves when handing food. Gloves, hairnet and apron must be used at all times and ensure to wash hands before touching food.</p> <p>All staff were re-trained on how to wash hands with soap and how many minutes they need to wash hands (2 minutes). They were advised to wash hands at all time before touching food.</p> <p>Hand soap in the bathroom were provided, advised the caregiver to always check the bathroom to make sure hand soap is always available. 04/12/19</p>

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9 174	<p>Continued From page 6</p> <p>did not sanitize their hands with the hand sanitizer.</p> <p>During an interview with S5 on 04/11/19 at 11:15 AM stated that the bathroom in the lounge should have hand soap for the clients.</p> <p>Good Hygiene basics staff training content reviewed. Good personal hygiene habits include:... washing hands with soap after going to the toilet.</p> <p>3) During a tour of the kitchen in the restaurant on 04/12/19 at approximately 10:00 AM three staff preparing food in the kitchen were not wearing hairnets. One staff chopping produce was not wearing gloves.</p> <p>During an interview with S9, stated the staff don't wear gloves while preparing the food but we make sure they wash their hands. All of the kitchen staff are trained on food safety every year.</p> <p>According to the United States Department of Agriculture (USDA) Foodborne illness, what consumers need to know August 7, 2013..... Foods, including safely cooked and ready-to-eat foods, can become cross-contaminated with pathogens transferred from from food handlers with poor personal hygiene.</p> <p>4) Observation was made on 04/11/19 at 0510 AM at residence 3C of S1 doing a blood sugar check with Accucheck equipment. When done obtaining sample, S1 was asked how she cleans the Accucheck machine. S1 looked at surveyor and stated "I don't know." S1 then placed the Accucheck machine back into a pouch.</p>	9 174	<p>Kitchen staff were provided with gloves, apron and hairnet. Advised the staff to always use necessary equipment when handing food.</p> <p>Caregivers and other staff receives training specifically on how to clean or sanitized Accucheck. They were trained on how to appropriately clean and sanitized and they were provided with sanitizer. The nurses will continue to monitor and check caregivers to make sure Accucheck are being properly cleaned/sanitized.</p> <p>The caregivers received training on taking blood pressure and documenting appropriately. Advised to report to the nurses right away when they observe their client of teh change of their physical appearance, changes on their sleeping pattern, etc.</p>	<p>04/11/19</p> <p>04/23/19</p>

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9 174	<p>Continued From page 7</p> <p>Interview on 04/11/19 at 10:45 AM with S7 at the Wellness Center. Queried S7 regarding training for Accucheck machine. S7 stated that she verbally have trained the staff but she has no documentation of training. S7 was asked to recite the verbal training and stated "they are told to wipe down every time they use the Accucheck machine and the needle goes in the sharp container. S7 was informed that S1 stated she didn't know how to clean machine. S7 then provided the Sani-Cloth Plus germicidal disposable cloth wipes. S7 stated they are to "wipe down for one minute." S7 was asked to read the instructions on the package label and confirmed that the label states it is a "3-minute germicidal wipe."</p> <p>5) Observation on 04/11/19 at 0520 AM at residence 3C of S1 obtaining vital signs. S1 obtained blood pressure (BP) of C3 which was 176/113. S1 stated "It's high every day because he doesn't sleep. C3 doesn't sleep and was going to the bathroom all night." S4 did a recheck of BP at 0700 and C3's BP was 163/82</p> <p>Record review (RR) on 04/11/19 with S7 of C3's health maintenance record revealed that resident had only partial sleep for nine days out of ten days in the period of April 1 through April 10, 2019. RR of vital signs for C3 revealed documentation of high blood pressure was not recorded.</p> <p>Interview on 04/11/19 at 10:55 AM with S7 at the Wellness Center. Queried S7 regarding training of documentation and reporting of vital signs with staff. Queried S7 if staff know what to do if vital signs are abnormal. S7 stated staff are supposed to report to the nurse any diastolic</p>	9 174	<p>Continuation from page 7:</p> <p>The nurses will continue to supervise all caregivers to make sure they are following what they learned from the training, if not re-train as needed.</p> <p>Type text here</p>	
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9 174	Continued From page 8	9 174		
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above 90 and any systolic over 140. Interview continued with concurrent review of vital sign readings revealed that C3 did not document the high blood pressure observed at 0520 AM and did not report it to S7. S7 was informed that S1 stated that C3's BP has been high every day but not reported or documented according to the vital sign reading record. S7 stated that she was no aware of high blood pressures.

RR of Nurse training done on 04/12/19 shows S1 and S4 have had training with handouts and demonstration of administration of medication and includes reporting and documentation. Handout shows the goal and objectives are

- Demonstrate how to transcribe a prescription
- Follow the Med Logs order exactly.
- Consistently and accurately observe, report, and record any change in the normal daily routine, ways of communicating,

appearance, physical health, and general manner or mood of the client.

Eight rights of medication administration are:

- Right medication
- Right dose
- Right client
- Right route
- Right time
- Right documentation
- Right reason
- Right response

Guidelines for the right documentation include:

If no record = it didn't happen

Never chart on a medication before giving it (big no no)

Record it immediately = prevent errors

Documentation includes

- Name, dose, route, exact time of administration, site. If refuses, ongoing procedure, tests, explain reason it was not given

The caregivers receives training on medication administration. They learned how to correctly transcribe prescription, they learned how to appropriately document and how to observe their clients. They were advised that when administering meds. they have to follow the eight rules and administer medication one client at a time to avoid confusion. 04/16/19

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9 174 Continued From page 9
in notes. - Circle initial missed doses.

9 174