

Hawaii Dept. of Health, Office of Health Care Assurance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HI02ADHC004	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  07/23/2020
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NAME OF PROVIDER OR SUPPLIER  CENTRAL UNION CHURCH ADULT DAY CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 1660 SOUTH BERETANIA STREET HONOLULU, HI 96826
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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6 000	INITIAL COMMENTS  A re-licensing survey was conducted by the Office of Health Care Assurance on July 23, 2020. The census at time of entrance was 42 clients.	6 000		
6 229	11-96-30(h)(4) PHYSICAL PLANT CONSTRUCTION REQUIREMENT  An adequate supply of hot and cold potable running water must be provided at all times. Temperatures of hot water at plumbing fixture used by clients shall be automatically regulated and shall be maintained at a level between 100 to 110 F; This Statute is not met as evidenced by: Based on interview and record review, the facility failed to ensure a supply of hot running water is provided to the restroom sinks.  Findings include:  On 07/23/20 at 01:40 PM, record review of letter dated March 12, 2019 sent to the Office of Health Care Assurance requesting for "Hot Water Waiver." Letter stating "In reference to the citation of 11-96-30(h)(4) Physical Plant Construction Requirement ... allow us to maintain the sink spigots with cold water (73.8 degrees)."  On 07/23/20 at 03:15 PM, interview with Administrative Staff/Chief Operating Officer who stated it would involve major construction and cost to put hot running water in the restrooms. Therefore, the facility requests for a "Hot Water Waiver."	6 229	11-96-30(h)(4) PHYSICAL PLANT CONSTRUCTION REQUIREMENT Central Union Church Adult Day Care and Adult Day Health Center is committed to providing an adequate supply of hot potable running water at all times. Please see attached letter requesting a waiver to 11-96-30(h)(4), which will allow the center to maintain the sink spigots with cold water (73.8 degrees F).	7/24/20

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 STATE OF HAWAII  
 DOI-HOHA  
 MEDICARE CERTIFICATION

Office of Health Care Assurance LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  <i>Shelly Wong</i>	TITLE Chief operating officer	(X6) DATE 8/10/2020
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