

# STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<b>Facility's Name: Buenavista Adult Residential Care Home</b>	<b>CHAPTER 100.1</b>
<b>Address: 81-2010 Haku Nui Road, Captain Cook, Hawaii 96704</b>	<b>Inspection Date: September 15, 2020 – 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.**

**YOUR PLAN OF CORRECTION MUST BE SUBMITTED WITHIN TEN (10) WORKING DAYS. IF IT IS NOT RECEIVED WITHIN TEN (10) DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.**

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (a)(4)  The licensee or primary care giver shall maintain individual records for each resident. On admission, readmission, or transfer of a resident there shall be made available by the licensee or primary care giver for the department's review:</p> <p>A report of a recent medical examination and current diagnosis taken within the preceding twelve months and report of an examination for tuberculosis. The examination for tuberculosis shall follow current departmental policies;</p> <p><b><u>FINDINGS</u></b>  Resident #1, admitted on August 4, 2019, two (2) step tuberculosis (TB) skin test read "07/01/20 Negative (0 mm)" and "07/08/2020 Negative (0 mm)." However, no documented date of TB skin test administration or reading.</p> <p><u>This is a repeat deficiency from your 2019 annual inspection.</u></p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><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>Yes I did, I called the Life Care Center, gave me the forms that shows the dates was been read, both on the 2 steps, dates of administration and dates of reading and results. →</i></p>	<p style="text-align: right;"><i>9/25/2020</i></p>

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<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (a)(4)  The licensee or primary care giver shall maintain individual records for each resident. On admission, readmission, or transfer of a resident there shall be made available by the licensee or primary care giver for the department's review:</p> <p>A report of a recent medical examination and current diagnosis taken within the preceding twelve months and report of an examination for tuberculosis. The examination for tuberculosis shall follow current departmental policies;</p> <p><b><u>FINDINGS</u></b>  Resident #1, admitted on August 4, 2019, two (2) step tuberculosis (TB) skin test read "07/01/20 Negative (0 mm)" and "07/08/2020 Negative (0 mm)." However, no documented date of TB skin test administration or reading.</p> <p><u>This is a repeat deficiency from your 2019 annual inspection.</u></p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><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><i>= In the future at the time of the admission or prior to, I review the TB 2 steps documentation for both of administration reading, &amp; results. If its not complete then I wont admit the client. →</i></p>	<p style="text-align: right;"><i>9/25/2020</i></p>

Licensee's/Administrator's Signature: Sandy M. Buenavista

Print Name: Sandy M. Buenavista

Date: 9/25/2020