Hawaii Dept. of Health, Office of Health Care Assuranc

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	125067	A. BUILDING: _____ B. WING _____	02/03/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ISLANDS SKILLED NURSING & REHABILITATI(	1205 ALEXANDER STREET HONOLULU, HI 96826

(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
4 000	Initial Comments A relicensure survey was conducted by the Office of Health Care Assurance (OHCA) on February 3, 2021. The facility was found to be not in compliance with Title 11, Chapter 94.1. Facility census: 25	4 000		
4 131	11-94.1-29(b) Resident abuse, neglect, and misappropriation (b) All alleged violations involving mistreatment, neglect, or abuse, including injuries of unknown source or origin, and alleged misappropriation of resident property shall be reported immediately to the administrator of the facility, and to other officials in accordance with state law through established procedures. This Statute is not met as evidenced by: Based on staff interview, record review, and review of the facility policy and procedure, the facility failed to ensure allegation of sexual abuse was reported to the appropriate state authorities as required by state law as evidenced by the facility not reporting an allegation of sexual abuse to OHCA. Findings include: On 02/02/21 at 10:30 AM, conducted a review of the facility grievance logs. Reviewed an investigation conducted by the facility in which Resident (R)1 reported two staff members for sexual abuse. The facility conducted an investigation and did not substantiate the allegation. The investigation report did not contain documentation to support the facility	4 131		

Office of Health Care Assurance
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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4 131	Continued From page 1 reported the allegation of sexual abuse to the appropriate state agencies. The facility is required to report allegations of sexual abuse immediately to OHCA and provide written documentation of the investigation conducted by the facility within five days of the incident. On 02/02/21 at 9:05 AM, requested the facility's policy and procedure related to reporting allegations of abuse and neglect from the Director of Nursing (DON) and was provided the facility's policy and procedure for Grievances/Complaints: Recording and Investigating, Filing, and Staff Responsibilities. According to the facility's policy, the responsibility of the Grievance Officer includes investigating grievances/complaints and coordinating actions with the appropriate state and federal agencies. During an interview with the DON at 02:58 PM, the DON confirmed she had conducted the investigation and did not notify OHCA of the allegations of sexual abuse. On 02/02/21 at 03:19 PM, conducted an interview with Social Services (SS) staff who is responsible for the role of the Grievance Officer. SS was not aware that the facility is required to report allegations of abuse, neglect, or misappropriations of property to OHCA, regardless if the allegations are substantiated or unsubstantiated, and did not report the incident to OHCA. On 02/02/21 at 03:56 PM, during an interview with the Administrator, he confirmed the allegation of sexual abuse reported by R1 was not reported to the OHCA.	4 131		

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4 159	Continued From page 2	4 159		
4 159	11-94.1-41(a) Storage and handling of food (a) All food shall be procured, stored, prepared, distributed, and served under sanitary conditions. (1) Dry or staple food items shall be stored above the floor in a ventilated room not subject to seepage or wastewater backflow, or contamination by condensation, leakages, rodents, or vermin; and (2) Perishable foods shall be stored at the proper temperatures to conserve nutritive value and prevent spoilage. This Statute is not met as evidenced by: Based on observation and staff interview, the facility failed to ensure stored food was stored under sanitary conditions as evidenced by an open bottle of expired oriental sesame seed dressing stored in the refrigerator. As a result of this deficiency, the residents are at risk of consuming an expired food product and are at risk of experiencing a food bourne illness. Findings include: On 02/03/2021 at 12:35 PM, conducted an inspection of the facility's kitchen. Observed an open bottle of Kraft Oriental Sesame dressing in the refrigerator. The dressing has a manufacturer expiration date (September 2020) printed on the bottle and a facility label (November 2020) on the bottle of dressing. The Kitchen Supervisor (KS) confirmed the dressing was mislabeled and expired. KS removed the expired dressing from the refrigerator.	4 159		

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4 197	Continued From page 3	4 197		
4 197	11-94.1-46(n) Pharmaceutical services (n) Discontinued and outdated prescriptions and containers with worn, illegible, or missing labels shall be disposed of according to facility policy. This Statute is not met as evidenced by: Based on observations and staff interviews, the facility failed to ensure expired medication and/or medications with missing labels are appropriately disposed. Findings include: On 02/03/2021 at 1:20 PM, conducted an inspection of a medication cart on the third floor with RN1. Observed a bottle of Nitro Stat pills with an expiration date of 12/97 printed on the bottle. The Nitro Stat did not have a pharmacy label indicating a resident's name, dose, frequency, route, or precautions. RN1 confirmed the Nitro Stat was expired and not appropriately labeled. RN1 stated the medication was most likely brought in by a resident and should not have been stored in the medication cart. In an interview at 2:58 PM, the Director of Nursing (DON) confirmed the bottle of Nitro Stat found in the medication cart was not appropriately labeled, expired, and should have been properly disposed of.	4 197		