

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/26/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 125055	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 10/08/2021
NAME OF PROVIDER OR SUPPLIER HI'OLANI CARE CENTER AT KAHALA NUI			STREET ADDRESS, CITY, STATE, ZIP CODE 4389 MALIA STREET HONOLULU, HI 96821		
(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) COMPLETION DATE	
F 000	INITIAL COMMENTS A recertification survey was conducted by the Office of Health Care Assurance on October 05, 2021 to October 07, 2021. The facility was not in substantial compliance with 42 CFR 483 subpart B. Upon entrance, there were 8 residents. Of the facility's 60 licensed beds, 20 were Medicare beds.	F 000			
F 800 SS=F	Provided Diet Meets Needs of Each Resident CFR(s): 483.60 §483.60 Food and nutrition services. The facility must provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs, taking into consideration the preferences of each resident. This REQUIREMENT is not met as evidenced by: Based on observations, staff interview, and record review, the facility failed to prepare and serve cold food at appropriate temperatures as it relates to food safety requirements. The deficient practice has the potential to place residents residing in the facility at risk for foodborne illness. Foods not held at appropriate temperatures may promote the growth of pathogens that cause foodborne illness. Findings Include: During an observation on 10/07/21 at 11:42 a.m., five cartons of thickened juice were half submerged in a plastic bin of ice in the resident dining room. The ice in the bin was half melted. The Dietary Supervisor (DS) performed temperature checks of the thickened cranberry juice and thickened apple juice at the request of the surveyor. The thickened cranberry juice	F 800	The procedure of placing containers of thickened juice were updated to include keeping the ice bath refreshed with new ice, and keeping the thickened beverages in the refrigerator until just prior to serving. The juice machine vendor was called to provide servicing to the juice machine to ensure that the appropriate temperatures are maintain while the juice is in the machine and at the time of dispensing. The Dining Supervisor will conduct daily checks of the juice temperatures. The Executive Check, Director of Dining Services, Dining Supervisor and Registered Dietitian will ensure that appropriate temperatures are maintained by spot checking temperatures.	10/15/21	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 800	Continued From page 1 measured at 44.5 degrees Fahrenheit. The thickened apple juice measured at 50 degrees Fahrenheit. The DS changed out the melted ice in the bin with new ice. At 11:53 a.m. the thickened apple juice temperature measured at 49.8 degrees Fahrenheit. During an observation on 10/07/21 at 11:57 a.m. in the kitchen service area, the DS performed a temperature check on orange juice from the juice machine at the request of the surveyor. The orange juice measured at 47.8 degrees Fahrenheit with ice in the cup. In an interview with DS on 10/07/21 at 11:42 a.m., the DS stated that the juice from the juice machine and the thickened juice should be at 41 degrees Fahrenheit or lower. The DS stated the thickened juice is taken from the fridge and put outside in the ice bin before meals. The temperature of the thickened juice isn't measured. Only the temperature of juice from the juice machine is taken before meal service. After meal service, the thickened juice cartons are put back into the fridge and used before the 7 days expiration date. In a record review on 10/07/21 at 11:42 a.m., the facility's temperature log of the kitchen service area indicated that the temperatures of milk, juice, coffee, and fruits were measured daily. The temperature for juice on 10/7/21 for lunch was documented at 40 degrees Fahrenheit. The temperature log states that acceptable temperature ranges of milk, juice and fruits is 41 degrees Fahrenheit and below.	F 800			
F 812 SS=F	Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2)	F 812			10/11/21

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F 812	<p>Continued From page 2</p> <p>§483.60(i) Food safety requirements. The facility must -</p> <p>§483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility.</p> <p>§483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is not met as evidenced by: Based on observation and interview, the facility failed to follow proper handwashing techniques as it relates to food safety requirements. Antimicrobial gel (hand hygiene agent that does not require water) cannot be used in place of proper handwashing techniques in a food service setting.</p> <p>Findings Include: During an observation in the kitchen service area on 10/07/21 at 11:22 a.m., a dietary aide (DA) removed and threw away her gloves after placing food trays in the steam table. She then used antimicrobial gel to clean her hands and then proceeded to put on new gloves and plate food.</p> <p>In an interview with the Director of Dining (DOD)</p>	F 812	<p>In-service training of the kitchen staff was conducted regarding proper hand washing procedures including having the staff each demonstrate handwashing at the end of the session. Additional training was done on maintain proper sanitary conditions and infection control during food production. To ensure that hand sanitizer is not used in place of soap and water the wall mounted hand sanitizer devices have been removed from the kitchen handwashing areas.</p> <p>To ensure that staff perform handwashing according to procedure the Executive Chef, Director of Dining Services, Dietary Supervisor and Registered Dietitian will periodically spot check staff. Corrective</p>		

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F 812	Continued From page 3 in the kitchen on 10/05/21 at 09:00 a.m., DOD stated, kitchen staff wash their hands with soap and water first. They can use hand sanitizer after washing their hands. The deficient practice has the potential to place residents residing in the facility at risk for foodborne illness.	F 812	action regarding compliance to infection control, handwashing and kitchen sanitation/food preparation will be documented in the kitchen staffs file along with retraining. The Executive Chef, Director of Dining Services, Dietary Supervisor and Registered Dietitian will ensure compliance with handwashing and infection control management.		

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E 000	Initial Comments The facility was found in compliance with Section 483.73. Requirement for Long-Term Care (LTC) Facilities of Appendix Z - Emergency Preparedness for all provider and certified Supplier Types, State Operations Manual during the reortification survey conducted by the Office of Health Care Assurance (OHCA) from 10/05/21 to 10/07/21.	E 000			

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