STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: C.A.R.E. Cottage - Hilo #2	CHAPTER 98
Address: 100 Apoke Street, Hilo, Hawaii 96720	Inspection Date: April 19, 2021 - Approx

THIS PAGE MUST BE SUBMITTED WITH YOUR PLAN OF CORRECTION. IF IT IS NOT, YOUR PLAN OF CORRECTION WILL BE RETURNED TO YOU, UNREVIEWED.

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

				X
		FINDINGS No permanent register of all resident admissions and discharges.	A permanent register shall be maintained in ink or typewritten of all admissions and discharges of residents including:	RULES (CRITERIA)
and discharges moved to eHana database where all employees can access.	Conferred with leves program specialist and complete yearly read of all residential admissions	USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY	PART 1 DID YOU CORRECT THE DEFICIENCY? VOS	PLAN OF CORRECTION
			17/09/2021	Completion Date

	typewritten of all admissions and discharges of residents including: FINDINGS No permanent register of all resident admissions and discharges.	RULES (CRITERIA) §11-98-04 Administrative and statistical reports. (a) A permanent register shall be maintained in ink or
on ethina data Can access, upd for inspections. A venified with database is an as it can be accessed by a Staff educated		IA) I reports. (a) d in ink or
on elluna database where employees can access, update and print out for inspections. For inspections with Jill that electronic database is acceptable as long as it can be printed ent and accessed by all staff. Staff educated at ofloal 2021 monthily mouthing that register will be stored on elland database. All staff confirmed	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN? PERMISSION TO A STORE STORE THAT PERMISSION AGAIN?	PLAN OF CORRECTION PART 2
OF .	126/20/20	Completion Date

Employee #1 — hired 07-29-20, no pre-employment physical examination.	There shall be documented evidence that every employee has a pre-employment and an annual health evaluation by a physician. These evaluations shall be specifically oriented to determine the presence of any infectious disease liable to harm a resident. Each health evaluation shall include a tuberculin skin test or a chest x-ray.	RULES (CRITERIA)
Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.	PART 1	PLAN OF CORRECTION
		Completion Date

	S11-98-11 Minimum standards for licensure; personnel. (e) There shall be documented evidence that every employee has a pre-employment and an annual health evaluation by a physician. These evaluations shall be specifically oriented to determine the presence of any infectious disease liable to harm a resident. Each health evaluation shall include a tuberculin skin test or a chest x-ray. FINDINGS Employee #1 – hired 07-29-20, no pre-employment physical examination.	RULES (CRITERIA)
other tooked. Management and other tooked. Management and that this the have have been informed that this requirement must be completed, no exceptions. We have hired contracted with an outside agency, the Service, to assist us with our the requirements. They are setting up the ensure all requirements are met.	EUTURE PLAN USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN? In the future we will ensure that the hires complete that the hires and the treme a physical. This employed was a retire	PLAN OF CORRECTION
	05/25/2021	Completion Date

			<u> </u>
	FINDINGS Employee #2 – no current annual physical examination.	There shall be documented evidence that every employee has a pre-employment and an annual health evaluation by a physician. These evaluations shall be specifically oriented to determine the presence of any infectious disease liable to harm a resident. Each health evaluation shall include a tuberculin skin test or a chest x-ray.	RULES (CRITERIA)
TB current. Completed 02/24/2021. Copy on file.	Employee completed physical exam on oi/27/2021. Copy now on file.	DID YOU CORRECT THE DEFICIENCY? USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY	PLAN OF CORRECTION
12/46/20	01/27/21		Completion Date

	FINDINGS Employee #2 – no current annual physical examination.	There shall be documented evidence that every employee has a pre-employment and an annual health evaluation by a physician. These evaluations shall be specifically oriented to determine the presence of any infectious disease liable to harm a resident. Each health evaluation shall include a tuberculin skin test or a chort remains the statement of the statement o	RULES (CRITERIA) §11-98-11 Minimum standards for licensure; personnel. (e)
We have contracted with an outside agency, Pro Service, to assist us with our the needs. Credentials and annual requirements will be tracked annual requirements will be notified before and supervisors will be notified before expiration so that certifications, licensely manner. All certifications, licenses, ect. will be kept electronically on the with prosenice immediately after renewal to be available for audits.	PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?	FUTURE PLAN USE THIS SPACE TO EXPLAIN YOUR FUTURE	PLAN OF CORRECTION PART 2
05)01/2021			Completion Date

\times \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
includes orientation and training of all new staff and continuing educational opportunities for all staff.
orientation and training programs for staff or participate in orientation and training programs geared specifically to their needs. USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?
FINDINGS Employee #1 and Employee #2 – no CPI training.
Zoom now. Proservice was hired
to halp us track
recentification s
and management are
certifications expire.

	Client will follow up and complete after OIC.	
	Soonest date writable, so that hopefully	
	they have been scheduling for	
	a client scheduled before old dute,	
	Clients a physical exam before	
	reporting that due to COVID, it	
-	discharged. Nurses on Staff	
Z		
	No way to correct this	FINDINGS Resident #1 – admitted on March 29, 2021, no physical examination.
	USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY	Within twenty-one days of admission, a report of a resident's medical examination or written evidence of a physical examination within the prior twelve months shall be on file;
	DID YOU CORRECT THE DEFICIENCY?	contain the following:
	PART 1	Individual records shall be kept on each resident which
Date	I LAN OF COMMECTION	
Completio	PLAN OF CORRECTION	RULES (CRITERIA)

dent's USE THISS file; PLAN: WHA PLAN: WHA PLAN: WHA OCH OF EXPAND OF EXAM OF EXAM		\text{\text{\text{\$11-98-12 Minimum standards for licensure; services.}}} Individual records shall be kept on each resident which contain the following: Within twenty-one days of admission, a report of a resident's medical examination or written evidence of a physical examination within the prior twelve months shall be on file; FINDINGS Resident #1 - admitted on March 29, 2021, no physical examination.	RULES (CRITERIA)
EUTURE PLAN USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN? PX doctor'S offices begin to Expand their hours and appts Ave to Courd vaccines being completed, Averses should be able to assist Clients in acthing scheduled for physical Expan before tante of discharge. Ett appt unanilable before discharge (before 21 day stay) nurses will schedu Soonest possible appt and document in progress notes the reason and date of exam.		file;	(ERIA)
	If appt unavailable before discharge (before 21 day stay) nurses will sandy somest possible appt and document in progress notes the reason and dute of exam.	EUTURE PLAN USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN? PX doctor's offices begin to expand their hours and appts empleted, due to Cond vaccines being completed, durses should be able to assist durses should be able to assist durses in acting scheduled for physical clients in acting scheduled for physical	PLAN OF CORRECTION

デ **	\$11-98-14 Physical facility. (a)(1) The design and construction of each building or buildings comprising the facility shall meet the minimum requirements of the following codes: The county fire department codes; FINDINGS Resident bedroom #5 – battery in smoke detector was removed.	RULES (CRITERIA)
Smoke detector in Resident bedroom 04/21/2021 In the detector.	DID YOU CORRECT THE DEFICIENCY? USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY Checks for alarms and fire dury by attented have been instituted at each shift change (2-3 times a day). Shift change (2-3 times a day). Usident managers complete inventory Usident managers complete inventory And sigh off on shift change log that all delectors and batheries are	PLAN OF CORRECTION
04)21/2021 8	06/04/22	Completion Date

The design and construction of each building or buildings comprising the facility shall meet the minimum requirements of the following codes: The county fire department codes; FINDINGS Resident bedroom #5 – battery in smoke detector was removed.	RULES (CRITERIA)
EUTURE PLAN USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN? Checks for alarms and fire alarm batteines have been instituted at each Shift churage (2-3 times aday). Plesident managers complete inventory and sign off on Shift change log that all detectors and batteines are present.	PLAN OF CORRECTION
06 04 2021	Completion Date

	Sa Cle A e c I s	
	§11-98-14 Physical facility. (a)(3) The design and construction of each building or buildings comprising the facility shall meet the minimum requirements of the following codes: Applicable rules of the department relating to sanitation. FINDINGS Utensils and dishes were not thoroughly cleaned and sanitized after each use.	RULES (CRITERIA)
Quarterly reviews of Sanitation Staff meetings.	DID YOU CORRECT THE DEFICIENCY? USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY RCM's advised of findings and instructed to re-clean t sanitize all dishes and utensils.	PLAN OF CORRECTION
	04/19/2021	Completion

sanuzed after each use.	department relating to sanitation. e not thoroughly cleaned and	X §11-98-14 Physical facility. (a)(3) The design and construction of each building or buildings comprising the facility shall meet the minimum requirements of the following codes:	RULES (CRITERIA)
At monthly meeting, Rom's were re-educated regarding monitoring of clients to ensure dishes + utensils are thoroughly cleaned and sanitized. A dissed that if clients unwilling or unable to complete task correctly and code, Rom's will be required to re-clean + sanitize dishes + utensils before they are put away. Hensils before they are put away. This information will be revewed each guerter, at monthly meeting.	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?	PART 2 FUTURE PLAN	PLAN OF CORRECTION
	06/04/2021		Completion Date

		FINDINGS Resident bedroom #5 – window #1, no window screen, window #2, no curtain for providing privacy.	Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.	RULES (CRITERIA)
	furchased curtain for privacy.	USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY	PART 1 DID YOU CORRECT THE DEFICIENCY?	PLAN OF CORRECTION
		05/20/201		Completion Date

Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State. FINDINGS Front exit door – holes in screen.	RULES (CRITERIA)
DID YOU CORRECT THE DEFICIENCY? USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY Hived Continuotor to replace Screen.	PLAN OF CORRECTION
05/20/21	Completion Date

EUTURE PLAN USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN? STAFF Educated to report defects and for damage to Team lead and that contractor can be kined to that contractor can be kined to that I replace damage or supply staff can purchase new Hem. Staff can purchase new Hem.
--

	FINDINGS Resident living area – cobb webs near ceiling, ceiling fan dusty.	Maintenance. Facility. (c) Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.	RULES (CRITERIA)
Staff instructed to clean resident common living area, to include removing cobwebs wear ceiling and cleaning ceiling tan.	USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY	PART 1 DID YOU CORRECT THE DEFICIENCY?	PLAN OF CORRECTION
04/23/2024			Completion Date

	Cleaning staff. tasks.		
	Staff responsible to complete		
	`		
	Common areas. It clients		
2	encourage clients in cleaning		
	_		
	01 00 - d chall to accist		
	and to be completed regularly.		
	with cleaning tasks scheduled		
	Monthly calendar created		
06/04/2021			
	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?	FINDINGS Resident living area – cobb webs near ceiling, ceiling fan dusty.	
	FUTURE PLAN	with provisions of state and county zoning, building, fire, safety and health codes in the State.	
	PART 2	Maintenance. Facilities shall be maintained in accordance	\boxtimes
Completion Date	PLAN OF CORRECTION	RULES (CRITERIA)]

All windowpanes and screens unclean.	§11-98-14 Physical facility. (c) Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.	RULES (CRITERIA)
Staff instructed to clean window panes and screens.	PART 1 DID YOU CORRECT THE DEFICIENCY?	PLAN OF CORRECTION
ra/2/ho	Dave	Completion Date

						FINDINGS All windowpanes and screens unclean.	Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.	§11-98-14 Physical facility. (c)	RULES (CRITERIA)
complete cleaning tust.	If clients unwilling / mable to	Chiends in cleaning common wear.	be completed regularly. Staff	Cleaning tisks scheduled and to	Monthly culendar created with	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?	FUTURE PLAN	PART 2	PLAN OF CORRECTION
					06/04/2021			Date	Completion

Licensee's/Administrator's Signature:

Print Name: _

Date: 06/10/2021 Jemise Things , Exces Telmical

24

Licensee's/Administrator's Signature: Jennifer -Insper pound, Nursing Supervisor EH LURS

Print Name:

Date: 01/07/3072

24

RECEIVED