

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

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| Facility's Name: Poncethia R. Rambo's | CHAPTER 100.1 |
| Address: 1621 Nohoana Place, Hilo, Hawaii, 96720 | Inspection Date: November 2, 2021 – Annual |

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>§11-100.1-13 <u>Nutrition</u>. (d) Current menus shall be posted in the kitchen and in a conspicuous place in the dining area for the residents and department to review.</p> <p><u>FINDINGS</u> No menu posted in resident dining area.</p> | <p>PART 1</p> <p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>I made a copy of my 4 week cycle menu and past it in the dining area which included meal substitutions whenever I'm unable to cook the same food that was written in the menu for the residents to see.</i></p> | <p><i>Yes</i> <i>1-5-21</i></p> |

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| <input checked="" type="checkbox"/> | <p>§11-100.1-13 <u>Nutrition</u>. (d) Current menus shall be posted in the kitchen and in a conspicuous place in the dining area for the residents and department to review.</p> <p><u>FINDINGS</u> No menu posted in resident dining area.</p> | <p>PART 2</p> <p><u>FUTURE PLAN</u></p> <p>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p><i>In the future, I will post a copy of the menu and meal substitutions in the dining area in order for the residents to see. And will review each week and put a check mark in the calendar where I write my meal substitutions and mark my weekly meal cycle menu.</i></p> | 11-5-21 |

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| <input checked="" type="checkbox"/> | <p>§11-100.1-15 <u>Medications.</u> (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><u>FINDINGS</u> Resident #1 – May 2021 medication record read: “Ofloxacin 0.3% eye drops Instill 1 drop into affected eye 4x a day ophthalmic 7 days.” However, no physician order.</p> | <p>PART 1</p> <p>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</p> | 11-5-21 |

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| <input checked="" type="checkbox"/> | <p>§11-100.1-15 <u>Medications.</u> (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><u>FINDINGS</u> Resident #1 – the following medications listed on the November 2020 – April 2021 medication record:</p> <ul style="list-style-type: none"> • “D/C Senna 8.5 mg tab take 1 tab by mouth at bedtime as needed if no BM for 2 days” • “D/C Mucinex ER 600 mg tablet take 1 tab by mouth every 12 hours as needed for cough” <p>However, no physician order for administration since 10-25-19</p> | <p>PART 1</p> <p>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</p> | <p>11-5-21</p> |

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| <input checked="" type="checkbox"/> | <p>§11-100.1-17 <u>Records and reports.</u> (b)(3) During residence, records shall include:</p> <p>Progress notes that shall be written on a monthly basis, or more often as appropriate, shall include observations of the resident's response to medication, treatments, diet, care plan, any changes in condition, indications of illness or injury, behavior patterns including the date, time, and any and all action taken. Documentation shall be completed immediately when any incident occurs;</p> <p><u>FINDINGS</u> Resident #1 – no monthly progress notes November 2020 – October 2021.</p> | <p>PART 1</p> <p>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</p> | <p>11-5-21</p> |

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| <input checked="" type="checkbox"/> | <p>§11-100.1-19 <u>Resident accounts.</u> (d) An accurate written accounting of resident's money and disbursements shall be kept on an ongoing basis, including receipts for expenditures, and a current inventory of resident's possessions.</p> <p><u>FINDINGS</u> Resident #1 – belongings list not updated since admission (05-10-19).</p> | <p>PART 1</p> <p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>I updated the list of belongings today. Took out the old one and replace a new one.</i></p> | <p><i>Yes.</i></p> <p><i>11-5-21</i></p> |

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Licensee's/Administrator's Signature: Doncetta R. Ramo

Print Name: DONCETTA R. RAMO

Date: 11-12-21