

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Jack and Jill	CHAPTER 89
Address: 94-1088 Lumi Street, Waipahu, Hawaii 96797	Inspection Date: May 13, 2022 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.

'22 MAY 27 09:00

STATE OF HAWAII
HCH-ORCA
STATE LICENSING

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(5) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition.</p> <p>FINDINGS Resident #1 – On 3/30/22 Physician ordered “Furosemide 40mg QD x 1 week then QOD”, however, medication administration record states, “Furosemide 40mg QD x 1 week then three times a week” and MAR is initialed as given three times a week.</p> <p style="text-align: right; font-size: small;"> MAY 27 9:00 STATE OF MARYLAND BOH-CMSA STATE LICENSING </p>	<p>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</p>	<p>5/27/2022</p>

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<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(5) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition.</p> <p><u>FINDINGS</u> Resident #1 – On 3/30/22 Physician ordered “Furosemide 40mg QD x 1 week then QOD”, however, medication administration record states, “Furosemide 40mg QD x 1 week then three times a week” and MAR is initialed as given three times a week.</p>	<p style="text-align: center;">PART 2</p> <p style="text-align: center;"><u>FUTURE PLAN</u></p> <p style="text-align: center;">USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p><i>To ensure that it doesn't happen again, to carefully read the doctor's notes, to make sure notes matches with the prescriptions and the medical chart.</i></p> <p><i>On the video appointment with the doctor dated 3/30/2022, she stated to take 1 Tab Daily for 1 week, then 3 times a week. Prescription at the pharmacy was also called in 1 Tab Daily for 1 week, then 3 times a week.</i></p> <p><i>Called the doctor's office after the inspection because her notes says 40 mg daily for 1 week, then QOD. She send a correction stating "Medication Clarification" 3 Times a week.</i></p> <p><i>As CG, still our responsibility to read all the doctor's notes and the prescription labels and if different, to call the doctor's office immediately to correct the discrepancy. See at ch. "Correction note from Dr.'s office."</i></p>	<p>5/27/2022</p>

22 MAY 27 09:00

STATE OF HAWAII
DOH-CHCA
STATE LICENSING

Licensee's/Administrator's Signature: Emilia B. Tupinuo

Print Name: EMILIA B. TUPINIO

Date: 27 May 2022

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STATE OF HAWAII
DOH-GHCA
STATE LICENSING