

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Benchmark Behavioral Health System, Inc.	CHAPTER 98
Address: 2501 Waimano Home Road, Pearl City, Hawaii 96782	Inspection Date: July 20, 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.

STATE LICENSING SECTION
HAWAII
JUL 20 2022
11:37 AM

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-04 <u>Administrative and statistical reports.</u> (b) Written records of the occurrence of fire safety and disaster drills shall be available for inspection.</p> <p><u>FINDINGS</u> Facility with no documented evidence of completed written reports for fire drills for the past twelve (12) months.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p style="text-align: center;">USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p style="text-align: center;">Reports have been written for the fire drills conducted in conjunction with false alarms for the past 12 months.</p>	<p style="text-align: center;">09/01/22</p> <p style="text-align: center;">22 SEP -9 AM 37</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-04 <u>Administrative and statistical reports.</u> (b) Written records of the occurrence of fire safety and disaster drills shall be available for inspection.</p> <p><u>FINDINGS</u> Facility with no documented evidence of completed written reports for fire drills for the past twelve (12) months.</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>① To ensure fire drills are properly documented, the Fire Drill Documentation & Analysis Report has been superseded by the Fire Alarm Report which has been updated with a fire drill evaluation section. This Report will be the only document used by staff any time the fire alarm is activated, whether real, false, or training. This will assure alarms reclassified as false will be documented. Any shift experiencing a fire alarm will complete a Fire Alarm Report and submit to the Facility Manager.</p>	<p style="text-align: right;">22 SEP -9 AM 1:37</p>

② A fire drill schedule for the remainder of 2022 has been updated and submitted to senior leadership. 3rd shift fire drill was scheduled for 07/27/22 but conducted on 08/10/22 for the day shift. 08/24/22 saw evening shift. Night shift is scheduled for 09/22/22.

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-12 <u>Minimum standards for licensure; services.</u> (1) Individual records shall be kept on each resident which contain the following:</p> <p>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;</p> <p><u>FINDINGS</u> Resident #2 & Resident #3 – No documented evidence of a current annual physical examination clearance by a physician or advanced practice registered nurse (APRN).</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p style="text-align: center;">USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p style="text-align: center;"><i>Pls. see attachment dated Sept. 1, 2022</i></p>	<p style="text-align: center;"><i>09/01/22</i></p>

STATE OF PENNSYLVANIA
DEPARTMENT OF REVENUE
SALES TAX UNIT

22 SEP -9 AM 1:37

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-12 <u>Minimum standards for licensure; services.</u> (1) Individual records shall be kept on each resident which contain the following:</p> <p>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;</p> <p><u>FINDINGS</u> Resident #2 & Resident #3 – No documented evidence of a current annual physical examination clearance by a physician or APRN.</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 style="text-align: center;"><i>Pls see attachment dated September 1, 2022</i></p>	<p style="text-align: center;"><i>09/01/22</i></p> <p style="text-align: center;">22 SEP -9 AM 37</p> <p style="text-align: center;">STATE OF MARYLAND BOARD OF PHYSICIAN & PSYCHIATRIST STATE LICENSURE</p>

Licensee's/Administrator's Signature: Stephen R. Blotzke

Print Name: Stephen R. Blotzke

Date: 09/06/2022

22 SEP -9 AM 37

STATE OF MICHIGAN
DEPARTMENT OF STATE
STATE LICOHANC