STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	12G036	A. BUILDING _____ B. WING _____	10/14/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE ARC OF MAUI - HALE KIHEI	**179 HALE KAI STREET KIHEI, HI 96753**

(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
E 000	Initial Comments A recertification survey was conducted by the Office of Health Care Assurance on October 14, 2022. The facility was found to be in substantial compliance with the requirements at §483.475, Emergency Preparedness.	E 000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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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W 000	INITIAL COMMENTS A federal recertification survey was conducted by the Office of Health Care Assurance on 10/12/22 through 10/14/22. The facility was found not to be in substantial compliance with the requirements of 42 CFR 440.150, Subpart I, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID). ACTs #9244 was investigated and was unsubstantiated. Census: 5 clients Sampled: 3 clients	W 000		
W 454	INFECTION CONTROL CFR(s): 483.470(l)(1) The facility must provide a sanitary environment to avoid sources and transmission of infections. This STANDARD is not met as evidenced by: Based on observations, interviews, and review of facility staff training, the facility failed to provide a sanitary environment to avoid sources and transmission of infections by not washing hands before and after using gloves while handling food in the kitchen. As a result of this deficiency, clients are at risk for transmission of food-borne illnesses. Finding include: On 10/12/22 at 4:44 PM, Direct Service Professional (DSP) 4 was observed wearing food preparation gloves in the kitchen. DSP4 peeled some bananas and placed the peeled bananas	W 454		

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W 454	Continued From page 1	W 454		

on a cutting board. DSP4 then discarded her gloves and banana peels in the trash can. DSP4 then took a pot of food from the stovetop and emptied the food into a bowl. DSP4 then took the empty pot and placed it in the sink. DSP4 then put on a new pair of food preparation gloves and then proceeded to chop the bananas with a knife, grabbed the chopped bananas with her gloved hands, and placed the bananas in a bowl. She then discarded her gloves in the trash. DSP4 then washed the cutting board, dried it, and put it back on the kitchen counter. DSP4 then took a pot of cooked carrots off the stove, emptied the water from the pot in the sink, and then emptied the carrots on the cutting board. DSP4 then put on a pair of food preparation gloves. DSP4 then proceeded to chop the carrots with a knife and then used her gloved hands to put the chopped carrots in the bowl. She placed the cutting board and knife in the sink. She then discarded her gloves in the trash. DSP4 then went to the fridge, retrieved a tub of butter, got a spoon, used the spoon to mix butter into the bowl of chopped carrots, and then covered the bowl with foil.

On 10/12/22 at 5:13 PM, DSP4 was interviewed. When inquired when hands should be washed when using gloves, DSP4 stated that they are supposed to wash their hands before and after using gloves. DSP4 then immediately washed her hands and then donned a new pair of food preparation gloves.

On 10/12/22 at 5:50 PM, an interview was done with Case Manager (CM). When inquired whether DSP4 should have washed hands before and after using gloves, CM stated that staff should wash hands before and after using gloves in the kitchen because not doing so can cause

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W 454	Continued From page 2 cross contamination. On 10/14/22 at 09:10 AM, facility's "ICF/MR: Staff Training ...Food Service: Hand Washing and Glove Use" was reviewed and stated, "Wash Hands: Before and after use of gloves".	W 454		

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9 000	INITIAL COMMENTS A licensing survey was conducted by the Hawaii State Survey Agency from October 12 to October 14, 2022. The facility was found not to be in substantial compliance with the requirements of Title 11, Chapter 99, Subchapter 1. Census: 5 clients	9 000		
9 091	11-99-9(d)(2)(A) DIETETIC SERVICES All food shall be procured, stored, prepared, distributed, and served under sanitary conditions. This Statute is not met as evidenced by: Based on observations, interviews, and review of facility staff training, the facility failed to prepare food under sanitary conditions evidenced by a staff member not washing hands before and after using gloves during food preparation in the ktichen. Finding include: On 10/12/22 at 4:44 PM, Direct Service Professional (DSP) 4 was observed wearing food preparation gloves in the kitchen. DSP4 peeled some bananas and placed the peeled bananas on a cutting board. DSP4 then discarded her gloves and banana peels in the trash can. DSP4 then took a pot of food from the stovetop and emptied the food into a bowl. DSP4 then took the empty pot and placed it in the sink. DSP4 then put on a new pair of food preparation gloves and then proceeded to chop the bananas with a knife, grabbed the chopped bananas with her gloved hands, and placed the bananas in a bowl. She then discarded her gloves in the trash. DSP4 then washed the cutting board, dried it, and put it back on the kitchen counter. DSP4 then took a	9 091		

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9 091	Continued From page 1 pot of cooked carrots off the stove, emptied the water from the pot in the sink, and then emptied the carrots on the cutting board. DSP4 then put on a pair of food preparation gloves. DSP4 then proceeded to chop the carrots with a knife and then used her gloved hands to put the chopped carrots in the bowl. She placed the cutting board and knife in the sink. She then discarded her gloves in the trash. DSP4 then went to the fridge, retrieved a tub of butter, got a spoon, used the spoon to mix butter into the bowl of chopped carrots, and then covered the bowl with foil. On 10/12/22 at 5:13 PM, DSP4 was interviewed. When inquired when hands should be washed when using gloves, DSP4 stated that they are supposed to wash their hands before and after using gloves. DSP4 then immediately washed her hands and then donned a new pair of food preparation gloves. On 10/12/22 at 5:50 PM, an interview was done with Case Manager (CM). When inquired whether DSP4 should have washed hands before and after using gloves, CM stated that staff should wash hands before and after using gloves in the kitchen because not doing so can cause cross contamination. On 10/14/22 at 09:10 AM, facility's "ICF/MR: Staff Training ...Food Service: Hand Washing and Glove Use" was reviewed and stated, "Wash Hands: Before and after use of gloves".	9 091		
9 149	11-99-14(h) HOUSEKEEPING Sufficient locked storage areas shall be provided for all cleaning materials and equipment.	9 149		

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9 149	Continued From page 2 This Statute is not met as evidenced by: Based on observation, interview, and review of facility policy and procedures, the facility failed to provide a locked storage area for cleaning materials. As a result of this deficiency, the facility's clients were put at risk for harm from potential exposure from hazardous cleaning materials. Findings include: On 10/12/22 at 2:38 PM, a concurrent observation and interview was done with Case Manager (CM). During a tour of the house, CM and surveyor walked through an unlocked door from the kitchen and entered a separate hallway of the house. In this hallway, a closet with a door was located to the left and CM's office with a closed door was located at the end of the hallway. CM stated that the closet holds the facility's cleaning materials. Observed that the door to the closet was unlocked when CM opened the door. Two (2) bottles of Mr. Clean Cleaning Mist, two (2) bottles of Clorox, one (1) bottle of Windex cleaning spray, three (3) bottles of 70% Isopropyl alcohol, seven (7) containers of Clorox wipes, and two (2) spray bottles of Easy-Off oven cleaner was observed to be inside of the closet. CM stated that the closet was unlocked. When inquired if any clients would be able to access the closet, CM stated that Client (C) 1 and C2 could have access to the closet since they walk pass the closet on their way to deliver mail to CM or to ask CM questions in his office located at the end of the hallway. CM stated that the closet should be locked. On 10/12/22 at 3:40 PM, C1 and C2 were observed in the living room area. Observed C1	9 149		

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9 149	Continued From page 3 walking throughout the house with no assistance and picking up and handling various items with her hands with no deficits. C1 spoke to staff with ease and answered questions appropriately. C2 was observed walking throughout the house with no assistance. C2 was observed playing with an electronic tablet unassisted and C2 periodically conversed with staff about his tablet. C2 was also observed to be able to pick up a cup of water and drink it with ease. On 10/14/22 at 09:18 AM, facility's "Policy and Procedure Hazardous and Toxic Materials" was reviewed and stated, "All products are kept in locked cabinets separated from food or medications".	9 149		