

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Opportunities and Resources, Inc. House 2A	CHAPTER 89
Address: 64-5010 Kamehameha Highway, Wahiawa, Hawaii 96786	Inspection Date: November 28, 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.**

APR 24 10 08 51 AM  
STATE LICENSING SECTION  
OFFICE OF HEALTH CARE ASSURANCE

	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><b><u>FINDINGS</u></b> Resident #1 – Every three (3) month medication review and renewal order sheet reads, “Baniphen 25mg capsule, take 1 cap 4x a day for 3 days then take 1 cap every day until rash is clear”. This order was renewed on 12/27/21, 3/25/22, 6/15/22, and 9/23/22.</p> <p>However, on separate Physician’s orders: Dated 10/14/21 order says, “Banophen 25mg cap take 1 cap 4x/day as needed for rash, continue until rash clears” and, Dated 2/16/22, order says, “Banophen 25mg capsule – Take 1 capsule 4x a day as needed for rash”.</p> <p>The order on the every three (3) month renewal order does not match the 10/14/21 or the 2/16/22 orders. Order clarification was needed.</p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>The medication order have been clarified from the physician, and the Medication Administration Record (MAR) have been updated. The Banophen was clarified to take 1 cap 4x a day as needed for rash.</p>	<p style="text-align: center;">04.13.23</p> <p style="text-align: center;">23 APR 24 4 8:51</p> <p style="text-align: center;">STATE OF MICHIGAN DEPARTMENT OF CORRECTIONS</p>

	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><b><u>FINDINGS</u></b> Resident #1 – Every three (3) month medication review and renewal order sheet reads, “Baniphen 25mg capsule, take 1 cap 4x a day for 3 days then take 1 cap every day until rash is clear”. This order was renewed on 12/27/21, 3/25/22, 6/15/22, and 9/23/22.</p> <p>However, on separate Physician’s orders: Dated 10/14/21 order says, “Banophen 25mg cap take 1 cap 4x/day as needed for rash, continue until rash clears” and, Dated 2/16/22, order says, “Banophen 25mg capsule – Take 1 capsule 4x a day as needed for rash”.</p> <p>The order on the every three (3) month renewal order does not match the 10/14/21 or the 2/16/22 orders. Order clarification was needed.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN’T HAPPEN AGAIN?</b></p> <p>The assigned case manager was advised that in the future ensure that all three records coincided (90-day medication update, MAR and physician's order).</p>	<p>04.12.23</p> <p style="text-align: right;">'23 APR 24 AS 51</p> <p style="text-align: right; transform: rotate(-90deg);">STATE LICENSING</p>

	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><b><u>FINDINGS</u></b> Resident #1 – on 12/27/21, “Physician ordered, Triamcinolone 0.1% cream apply to affected area every 4 hours PRN”. Order does not include an indication for when to administer the medication.</p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>The medication Triamcinolone 0.1% cream have been clarified from the physician. The physician made a new order for the said medication include an indication as to when the medication will be administered.</p>	<p>04.13.23</p> <p style="text-align: right;">23 APR 24 10:51</p>

	<b>RULES (CRITERIA)</b>	<b>PLAN OF CORRECTION</b>	<b>Completion Date</b>
<input checked="" type="checkbox"/>	<p>§11-89-14 Resident health and safety standards. (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><b><u>FINDINGS</u></b> Resident #1 – on 12/27/21, “Physician ordered, Triamcinolone 0.1% cream apply to affected area every 4 hours PRN”. Order does not include an indication for when to administer the medication.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The assigned case manager will ensure to clarify with the physician immediately if a certain medication need to indicate for when to administer the medication.</p>	<div style="text-align: right; font-size: small;">       APR 24 11 18 AM '21        STATE OF MARYLAND        DEPARTMENT OF HEALTH &amp; GENERAL SERVICES     </div>

	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><b><u>FINDINGS</u></b> Resident #1 – 12/27/21 Physician’s order for, “Centrum tablet take 1 tab by mouth everyday”. On 2/10/22, Physician’s order reads, “Change to chewable centrum MV”. However, MAR continues to read the previous order until June 2022.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p style="text-align: right;">APR 24 08:51 STATE ELECTRONIC NOTIFY</p>

	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><b><u>FINDINGS</u></b> Resident #1 – 12/27/21 Physician’s order for, “Centrum tablet take 1 tab by mouth everyday”. On 2/10/22, Physician’s order reads, “Change to chewable centrum MV”. However, MAR continues to read the previous order until June 2022.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN’T HAPPEN AGAIN?</b></p> <p>The assigned case manager was advised that in the future if there are any medication changes, ensure to also change in the MAR and indicate the new changes for the caregiver to appropriately administer the medication.</p>	<p>04.12.23</p> <p style="text-align: right;">23 Apr 24 18:51</p> <p style="text-align: right; font-size: small;">STATE OF MONTANA DEPARTMENT OF STATE LABORATIONS</p>

	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><b><u>FINDINGS</u></b> Resident #1 – 12/27/21 Physician’s order for, “Centrum tablet take 1 tab by mouth everyday”. On 2/10/22, Physician’s order reads, “Change to chewable centrum MV”. However, MAR continues to read the previous order until June 2022.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p style="text-align: center;">23 Apr 24 18:51</p> <p style="text-align: center;">STATE OF MARYLAND COMPTROLLER STATE LICENSING</p>



	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><b><u>FINDINGS</u></b> Resident #1 – 12/27/21 Physician's order for, "Centrum tablet take 1 tab by mouth everyday". On 2/10/22, Physician's order reads, "Change to chewable centrum MV". However, MAR continues to read the previous order until June 2022.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The assigned case manager was advised that in the future if there are any medication changes, ensure to also change in the MAR and indicate the new changes for the caregiver to appropriately administer the medication.</p>	<p>04.12.23</p> <p style="text-align: right;">23 APR 24 08:51</p> <p style="text-align: right; font-size: small;">STATE OF MICHIGAN DEPARTMENT OF CORRECTIONS</p>

	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><b>FINDINGS</b> Resident #1 – On 4/21/22, Physician’s order (partially illegible), it read “_____ chewable MV fruity centrum”. Order needed clarification.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p style="text-align: center;">23 APR 24 10:51</p> <p style="text-align: center;">STATE OF MICHIGAN DEPARTMENT OF CORRECTIONS</p>

	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><b><u>FINDINGS</u></b> Resident #1 – On 4/21/22, Physician's order (partially illegible), it read “_____ chewable MV fruity centrum”. Order needed clarification.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>Clarified with the physician what was the order for the Centrum, it reads "Resume" chewable MV fruity centrum.</p>	<p>04.13.23</p> <p style="text-align: right;">23 APR 24 4:35:11 SOUTH CAROLINA CORRECTIONAL INSTITUTE</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><b><u>FINDINGS</u></b> Resident #1 – Despite 4/21/22 Physician’s order, MAR continues to read, “Centrum tablet take 1 tab by mouth everyday” until June 1, 2022 when MAR was edited to read, “Change to Flinstone, take1 tablet by mouth everyday”. No signed Physician’s order available for review.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p style="text-align: right;">23 APR 24 10:50 STATE LPT/SMS</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><b><u>FINDINGS</u></b> Resident #1 – Despite 4/21/22 Physician's order, MAR continues to read, "Centrum tablet take 1 tab by mouth everyday" until June 1, 2022 when MAR was edited to read, "Change to Flinstone, take1 tablet by mouth everyday". No signed Physician's order available for review.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The case manager was advised that in the future he/she will clarify with the physician about the changes of the medication coming from the pharmacy and a verbal order for the changes of the medication name.</p> <p>The caregiver will ensure that when medications receives from the pharmacy, to report to case manager so the CM can clarify with the physician accompanying with a verbal order.</p>	<p>04.12.23</p> <p style="text-align: right;">23 APR 24 8:50</p> <p style="text-align: right; font-size: small;">STATE OF MICHIGAN DEPARTMENT OF STATE LICENSING</p>

	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><b><u>FINDINGS</u></b> Resident #1 – On June 16, 2022, MAR indicates that on 5/5/22 the following was ordered, “Flintstone complete tablet chew and swallow 1 tablet by mouth daily”. No signed Physician’s order on that date is available for review. It is however included on the June 27, 2022 every three (3) month medication review and renewal form.</p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>The Flintstone complete tablet chew have been clarified from the physician and gave a verbal order for the medication instructions. The order says "Chew and swallow one tablet by mouth daily".</p>	<p>04.13.23</p> <p style="text-align: right; font-size: small;">STATE OF MONTANA DEPARTMENT OF HEALTH &amp; ORDER STATE ELECTRONICS</p>

23 APR 24 08:50

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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><b><u>FINDINGS</u></b> Resident #1 – On June 16, 2022, MAR indicates that on 5/5/22 the following was ordered, “Flinstone complete tablet chew and swallow 1 tablet by mouth daily”. No signed Physician’s order on that date is available for review. It is however included on the June 27, 2022 every three (3) month medication review and renewal form.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN’T HAPPEN AGAIN?</b></p> <p>In the future the case manager will ensure that if there is changes on the medication coming from the pharmacy, he/she will clarify with the physician immediately to be available for review and for the caregiver to appropriately administer the medications.</p>	

STATE PROGRAM  
STATE LICENSING

23 APR 24 08:50

	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><b><u>FINDINGS</u></b> Resident #1 – November 2022 MAR order for multivitamins reads, "Centrum Tablet take 1 tablet by mouth everyday", however, there is no such order available for review.</p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>The assigned case manager followed-up with the physician for the order to be available for review in the future.</p> <p>The CM was also advised that do not purge any medication order coming from the physician even the order is already old.</p>	<p>04.13.23</p> <p>04.12.23</p> <p style="text-align: right; vertical-align: bottom;">23 APR 24 08:50</p>



	<b>RULES (CRITERIA)</b>	<b>PLAN OF CORRECTION</b>	<b>Completion Date</b>
<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><b><u>FINDINGS</u></b> Resident #1 – November 2022 MAR order for multivitamins reads, “Centrum Tablet take 1 tablet by mouth everyday”, however, there is no such order available for review.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The case manager will ensure that in the future, he/she will not purge any medication order coming from the physician to ensure that all medication order will be intact in a client file and will always be available for review.</p>	<p>STATE OF MICHIGAN DEPARTMENT OF STATE LICENSING</p> <p>23 APR 24 10:50</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(12) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver.</p> <p><b><u>FINDINGS</u></b> Resident #1 - On 10/28/21 Physician ordered, "Debrox Soln two drops to both ears BID", however, medication was not transcribed in the medication administration record (MAR). It is unclear if resident received the medication.</p>	<p>PART 1</p> <p><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p>23 APR 24 4 8:39 PM</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(12) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver.</p> <p><b><u>FINDINGS</u></b> Resident #1 - On 10/28/21 Physician ordered, "Debrox Soln two drops to both ears BID", however, medication was not transcribed in the medication administration record (MAR). It is unclear if resident received the medication.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The caregiver was advised that in the future, ensure to write in the MAR for any new medication ordered by the physician, or inform the case manager to include in the MAR.</p>	<p>23 APR 24 10:49</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">STATE OF CONNECTICUT DEPARTMENT OF SOCIETY SERVICES</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(12) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver.</p> <p><b><u>FINDINGS</u></b> Resident #1 – October 2021 MAR for order “Banophen 25mg cap take 1 cap 4x/day as needed for rash, continue until rash clears” is incomplete. MAR reads, “Banophen 25mg cap take 1 cap 4x/day as needed for rash”. MAR is missing, “continue until rash clears” until May 2022.</p>	<p>PART 1</p> <p><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p>23 APR 24 18:49</p> <p>STATE OF MARI OFFICE OF THE STATE INSPECTOR</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(12) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver.</p> <p><b><u>FINDINGS</u></b> Resident #1 – October 2021 MAR for order “Banophen 25mg cap take 1 cap 4x/day as needed for rash, continue until rash clears” is incomplete. MAR reads, “Banophen 25mg cap take 1 cap 4x/day as needed for rash”. MAR is missing, “continue until rash clears” until May 2022.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The case manager will ensure that MAR and the physician's order coincides, and followed up with the physician's for the correct instructions.</p>	<p style="text-align: right;">23 Apr 24 10:49</p> <p style="text-align: right; font-size: small;">STATE DEPARTMENT OF HEALTH</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (b)(2)            During residence, records shall be maintained by the caregiver and shall include the following information:</p> <p>Observations of the resident's response to medication, treatments, diet, provision of care, response to activities programs, indications of illness or injury, unusual skin problems, changes in behavior patterns, noting the date, time and actions taken, if any, which shall be recorded monthly or more often as appropriate but immediately when an incident occurs;</p> <p><b><u>FINDINGS</u></b>            Resident #1 – Progress notes do not note changes to medications nor resident’s response.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><b>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</b></p>	<p style="text-align: right;">23 Apr 24 09:49</p> <p style="text-align: right; font-size: small;">STATE LICENSING</p>

	<b>RULES (CRITERIA)</b>	<b>PLAN OF CORRECTION</b>	<b>Completion Date</b>
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (b)(2) During residence, records shall be maintained by the caregiver and shall include the following information:</p> <p>Observations of the resident's response to medication, treatments, diet, provision of care, response to activities programs, indications of illness or injury, unusual skin problems, changes in behavior patterns, noting the date, time and actions taken, if any, which shall be recorded monthly or more often as appropriate but immediately when an incident occurs;</p> <p><b><u>FINDINGS</u></b> Resident #1 – Progress notes do not note changes to medications nor resident's response.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>In the future the caregiver will ensure that when a client given a PRN, he/she will ensure to write a client response on the monthly observation, and why a client were given PRN meds.</p> <p>Re-training will be given to caregiver at least once a month to ensure that caregivers understand the importance of the monthly observation report.</p> <p>The case manager will also ensure that when the monthly observations submitted to him/her, to read and check if all the necessary changes and response of the client have been noted on the monthly observation.</p>	<p>STATE OF MICHIGAN STATE LITIGATION 23 APR 24 10:49</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (e)(5)            General rules regarding records:</p> <p>All records shall be complete and current and readily available for review by the department or any responsible placement agency.</p> <p><b><u>FINDINGS</u></b>            Resident #1 – Emergency information is outdated.</p>	<p style="text-align: center;"><b>PART 1</b></p> <p style="text-align: center;"><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>The emergency information for the client have been updated.</p>	<p style="text-align: right;">23 Apr 24 18:19</p> <p style="text-align: right; font-size: small;">STATE OF MICHIGAN            DEPARTMENT OF            STATE LINDSEY MC</p>



	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (e)(5)            General rules regarding records:</p> <p>All records shall be complete and current and readily available for review by the department or any responsible placement agency.</p> <p><b><u>FINDINGS</u></b>            Resident #1 – Emergency information is outdated.</p>	<p style="text-align: center;"><b>PART 2</b></p> <p style="text-align: center;"><b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>The case manager was advised that in the future always check the emergency information for all clients to ensure that they are up to date in case of emergency.</p>	<p>04.12.23</p> <p style="text-align: right;">23            APR 24 10:49            STATE OF MISSISSIPPI            DEPT. OF CORRECTIONS</p>

Licensee's/Administrator's Signature: *Susanna F. Cheung*

Print Name: Susanna F. Cheung, President/CEO

Date: 04.20.2023

STATE OF HAWAII  
DEPARTMENT OF  
STATE LICENSING

23 APR 24 AS 49