

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Josephine Cabal (ARCH/Expanded ARCH)	CHAPTER 100.1
Address: 2322 Awapuhi Street #1, Hilo, Hawaii 96720	Inspection Date: May 10, 2023 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) WORKING DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-16 <u>Personal care services.</u> (h) A schedule of activities shall be developed and implemented by the primary care giver for each resident which includes personal services to be provided, activities and any special care needs identified. The plan of care shall be reviewed and updated as needed.</p> <p>FINDINGS Resident #1 -- Daily program of activities missing the following time frames: 10:00am-12:00pm, 1:00pm-4:00pm, and 6:00pm-7:00pm.</p> <p>Submit a revised daily program of activities with plan of correction.</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><i>H-100.1-16 PERSONAL CARE SERVICES (h)</i></p> <p><i>YES, I HAVE UPDATED THE RESIDENT DAILY PROGRAM OF ACTIVITIES AND SUBMITTED A REVISED DAILY SCHEDULE OF ACTIVITIES.</i></p>	<p><i>5/11/2023</i></p>

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(D) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>A drill shall be held to provide training for residents and personnel at various times of the day or night at least four times a year and at least three months from the previous drill, and the record shall contain the date, hour, personnel participating and description of drill, and the time taken to safely evacuate residents from the building. A copy of the fire drill procedure and results shall be submitted to the fire inspector or department upon request;</p> <p>FINDINGS Monthly fire drills performed only between 9:00am-3:13pm and not at various times of the day/night.</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>11-100.1-23 PHYSICAL ENVIRONMENT(g) (3)(D) FIRE PREVENTION PROTECTION.</p> <p>YES, I STARTED PERFORMING DURING THE NIGHT, BETWEEN 5:00 AM - 7:00 AM.</p>	<p>5/20/2023</p>

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Licensee's/Administrator's Signature: Joseph V. Cahal

Print Name: JOSEPHINE Y. CAHAL

Date: 05/26/2023

10-1-11-20