## Office of Health Care Assurance

## **State Licensing Section**

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Pearl City Specialized Residential Services Population	CHAPTER 98
Address:	Inspection Date: October 5, 2022 Annual
1668 Hoohulu Street, Pearl City, Hawaii 96782	

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.

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	§11-98-12 Minimum standards for licensure; services. (2) Individual records shall be kept on each resident which contain the following:	PART 1 DID YOU CORRECT THE DEFICIENCY?	
	A report of a tuberculin skin test. If the skin test is positive, or known to be positive, there shall be documentation that appropriate medical follow-up has been obtained;	USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY	
	FINDINGS  Resident #1 & Resident #3 — No documented evidence of a current annual tuberculosis clearance signed by a physician or advanced practical registered nurse (APRN).	The following corrections were made by 01/30/2023. Residents #1 and #2 with negative TB Test Results.	
		Resident #1 – HSH initially reported resident w/an updated negative test result 02/14/2022 following 2 step in 01/2021. Evidence of this reading isn't clear on the attached record. SRSP Admit 09/2022. Correction with negative TB Test result 01/25/2023 attached.	01/25/23
		Resident #3 - Correction with negative TB Test result in place 10/12/2022.	10/12/22
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The state of the s	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	§11-98-12 Minimum standards for licensure; services. (2) Individual records shall be kept on each resident which contain the following:	PART 2 <u>FUTURE PLAN</u>	
	A report of a tuberculin skin test. If the skin test is positive, or known to be positive, there shall be documentation that appropriate medical follow-up has been obtained;	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?	
And the Parameter of th	FINDINGS Resident #1 & Resident #3 – No documented evidence of a current annual tuberculosis clearance signed by a physician or APRN.	Residents prior to admission at the SRSP home will have a 2 step PPD followed by an annual TB clearance signed by a physician or advanced practical registered nurse (APRN).	
		RN in addition to medical appointments is to ensure annual physical examinations and TB updates are tracked and communicated to CM providers 30 days prior to expiration date to ensure timely receipt in accordance with OHCA standards. This process was addressed by Charge Nurse with RNs in supervision 11/17/2022 and will cont. to be monitored via quarterly chart reviews conducted by RCMs and Program Director.	11/17/2022

The state of the s	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	§11-98-12 Minimum standards for licensure; services. (5) Individual records shall be kept on each resident which contain the following:  Documentation that a physician was consulted within five days of admission as well as for all significant illnesses and injuries;  FINDINGS  Resident #2 & Resident #3 - No documented evidence of physician notification of admission within five (5) days of admission on file.	Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.	

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	§11-98-12 Minimum standards for licensure; services. (5) Individual records shall be kept on each resident which contain the following:	PART 2 FUTURE PLAN	
	Documentation that a physician was consulted within five days of admission as well as for all significant illnesses and injuries;	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?	
The control of the co	FINDINGS Resident #2 & Resident #3 — No documented evidence of physician notification of admission within five (5) days of admission on file.	Residents #2 and #3 are with physician notifications of admission (5) days of admission on file. However, this notification is written by the Program Director and not filed in the resident's record. This process has been reviewed with the SRSP Program Team Lead and effective 11/2022, the Program Team Lead will ensure physician notifications of admission is sent to CAREs Medical Director and filed in Residents active chart. Process will be included as a line item to review during quarterly chart reviews.	11/11/2022
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Licensee's/Administrator's Signature:	Who was los Series Druster
Print Name:	Hilde Sne
Date:	01/21/2023.