

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: The Ohana Addiction Treatment Center	CHAPTER 98
Address: 73-4617 Kaloko Halia Place, Kailua-Kona, Hawaii 96740	Inspection Date: March 31, 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) DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-11 <u>Minimum standards for licensure; personnel</u> (1) The administrator shall see that at least one staff member on each shift possesses a current First Aid certificate and CPR training. Recertification of training shall be required by all staff at least every two years.</p> <p>FINDINGS Employee #1 & Employee #2 No documented evidence of a current First Aid certification on file for departmental review.</p>	<p style="text-align: center;">PART I</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>Both employee #1 and employee #2 completed the First Aid and CPR certifications. Employee #1 completed the First Aid certification on April 12th, 2023. Employee #2 completed the First Aid certification on April 21st, 2023.</p>	<p>4/21/2023</p>

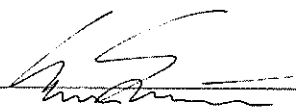
	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-11 <u>Minimum standards for licensure; personnel.</u> (1) The administrator shall see that at least one staff member on each shift possesses a current First Aid certificate and CPR training. Recertification of training shall be required by all staff at least every two years.</p> <p>FINDINGS Employee #1 & Employee #2 - No documented evidence of a current First Aid certification on file for departmental review.</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>The Human Resources Director will ensure compliance by ensuring all new hires complete the First Aid certification within 30 days of hire. The Human Resources Director will follow up 10 days after hire to confirm a scheduled date for the certification. Employees will be informed 30 days prior to expiration of when renewal certification (every 2 years) is required. Continued follow up for review certifications will be conducted to ensure compliance with this standard. At all times a person is on staff that is First Aid certified to be in compliance with the regulations.</p>	<p>4/21/2023</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-11 <u>Minimum standards for licensure, personnel.</u> (1) The administrator shall see that at least one staff member on each shift possesses a current First Aid certificate and CPR training. Recertification of training shall be required by all staff at least every two years.</p> <p><u>FINDINGS</u> Employee #2 No documented evidence of a current CPR certification on file for departmental review</p>	<p style="text-align: center;">PART I</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>Employee #2 completed the CPR certifications. Employee #2 completed the CPR certification on April 21st, 2023.</p>	<p>4/21/2023</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-11 <u>Minimum standards for licensure; personnel.</u> (1) The administrator shall see that at least one staff member on each shift possesses a current First Aid certificate and CPR training. Recertification of training shall be required by all staff at least every two years.</p> <p><u>FINDINGS</u> Employee #2 No documented evidence of a current CPR certification on file for departmental review.</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>The Human Resources Director will ensure compliance by ensuring all new hires complete the CPR certification within 30 days of hire. The Human Resources Director will follow up 10 days after hire to confirm a scheduled date for the certification. Employees will be informed 30 days prior to expiration of when renewal certification (every 2 years) is required. Continued follow up for review certifications will be conducted to ensure compliance with this standard. At all times a person is on staff that is CPR certified to be in compliance with the regulations.</p>	<p>4/21/2023</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-14 <u>Physical facility.</u> (c) Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.</p> <p><u>FINDINGS</u> Internal stairway without guardrail.</p>	<p style="text-align: center;">PART I</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>Internal stairway was identified to be deficient due to not having a guardrail for safety. A guardrail was completed on the internal stairway.</p>	<p>4/15/2023</p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-14 <u>Physical facility.</u> (c) Maintenance. Facilities shall be maintained in accordance with provisions of state and county zoning, building, fire, safety and health codes in the State.</p> <p><u>FINDINGS</u> Internal stairway without guardrail.</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>On a weekly basis, each building is inspected by an RCT staff member to include safety, risks, hazards and damage. The RCT staff member will include inspection of the guardrail for safety and damage. Any concerns will be addressed immediately with the CEO to include a work order.</p>	<p>4/15/2023</p>

Licensee's/Administrator's Signature:  _____
Print Name: Elliott Smith
Date: 7/5/2023