

Hawaii Dept. of Health, Office of Health Care Assurance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 12G020	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/07/2023
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NAME OF PROVIDER OR SUPPLIER THE ARC IN HAWAII - 6 A	STREET ADDRESS, CITY, STATE, ZIP CODE 852 PAAHANA STREET HONOLULU, HI 96816
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(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) COMPLETE DATE
9 000	INITIAL COMMENTS A re-licensure survey was conducted by the Office of Health Care Assurance on July 7, 2023. The facility was found not to meet the requirements of Title 11, Chapter 99, Intermediate Care Facilities for Individuals with Intellectual Disabilities.	9 000		
9 079	11-99-8(c) DENTAL SERVICES The facility shall assist each resident to obtain necessary dental care and at least an annual evaluation. This Statute is not met as evidenced by: Based on record review and interview with staff member, the facility failed to ensure one of two client's (Client (C) 2) sampled received dental services at least annually. Findings include: Review of C2's health record documented the last dental service C2 received was on 04/04/22, past the annual date. On 07/07/23 at 09:15 AM interview with Registered Nurse (RN) was done. RN confirmed C2's last dental appointment was on 04/04/22 and is past the annual date.	9 079		
9 149	11-99-14(h) HOUSEKEEPING Sufficient locked storage areas shall be provided for all cleaning materials and equipment. This Statute is not met as evidenced by: Based on observation and interview with staff	9 149		

Office of Health Care Assurance LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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9 149	<p>Continued From page 1</p> <p>members, the facility failed to ensure cleaning solution in a cabinet was locked.</p> <p>Findings include:</p> <p>On 07/05/23 at 03:27 PM concurrent observation and interview with Home Manager (HM) was done. Observed bottles of cleaning solution, including Clorox in a cabinet under the sink. The cabinet was unlocked and the key was left in the lock. Inquired with HM if the cabinet should be locked, HM stated yes.</p> <p>On 07/07/23 at 09:47 AM interview with Program Manager (PM) was done. PM confirmed chemicals should be kept in locked storage.</p>	9 149		