

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Ilar, Emelyn (ARCH/Expanded ARCH)	CHAPTER 100.1
Address: 1712 Keone Street, Hilo, Hawaii 96720	Inspection Date: August 30, 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>§11-100.1-15 <u>Medications.</u> (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 – Order for ascorbic acid not included on 2/14/2023 admission orders. Order was received on 3/21/2023; however, medication administration record (MAR) notes supplement was being administered since admission on 3/7/2023.</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>h 2/22/24</p>

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<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>, (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 – Order for ascorbic acid not included on 2/14/2023 admission orders. Order was received on 3/21/2023; however, medication administration record (MAR) notes supplement was being administered since admission on 3/7/2023.</p>	<p>PART 2</p> <p><b><u>FUTURE PLAN</u></b></p> <p>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p>Physician Order form was clarified and signed by the doctor on 12/1/23</p> <p>To avoid this deficiency I'll check my admission checklist before admission to be sure to administered correctly the medicine I'll clarify to the doctor all the medicine the day of admission.</p>	<p>2/22/24</p>

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<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (e)                      All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><u>FINDINGS</u>                      Resident #1 - Quetiapine order from 5/19/2023 discontinued/changed on 5/24/2023; however, old order was not discontinued on MAR, and new order did not indicate PRN status as ordered.</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>After the fact cannot be corrected the deficiency</i></p> <p><i>To ensure this fact deficiency always double check &amp; clarify from the doctor before administered medicine &amp; be signed by physician.</i></p>	<p style="text-align: right;"><i>2/22/24</i></p>

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	<p>§11-100.1-15 <u>Medications.</u> (e)                      All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b>FINDINGS</b>                      Resident #1 - Cyanocobalamin ordered 2/14/2023 = 500 mcg - take 1 tablet orally by mouth daily. Order for supplement changed on 3/21/2023 to 1000 mcg - take 1 tablet orally by mouth daily. Per MAR, 1000 mcg was being given since admission on 3/7/2023, despite order being changed on 3/21/2023.</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><i>a</i></p> <p><i>2/22/24</i></p>

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	<p><b>§11-100.1-15 Medications. (c)</b> All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 - Cyanocobalamin ordered 2/14/2023 = 500 mcg - take 1 tablet orally by mouth daily. Order for supplement changed on 3/21/2023 to 1000 mcg - take 1 tablet orally by mouth daily. Per MAR, 1000 mcg was being given since admission on 3/7/2023, despite order being changed on 3/21/2023.</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 style="text-align: center;"><i>I created a reminder note in my checklist in the client binder and I'll refer it to the checklist when I do my weekly audit.</i></p>	<p style="text-align: center;"><i>w</i></p> <p style="text-align: center;"><i>2/27/24</i></p>

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	<p>§11-100.1-15 <u>Medications</u>. (e)                      All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b>                      Resident #1 – 3/6/2023 physical exam states, “See attached med list.” Medication list dated 2/14/2023, included, “Albuterol 2.5 mg/3 ml (0.083% inhl neb soln), use 3 ml via nebulizer 3 times a day x2 days then q 4 hours pm.</p> <p>Medication was not included on the MAR.</p> <p>No order to discontinue 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 style="text-align: center;"><i>Physician <sup>in</sup> <del>my</del> order form was signed by the doctor on 12/1/23</i></p>	<p style="text-align: center;"><i>2/22/24</i></p>



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	<p><b>§11-100.1-15 Medications. (e)</b> All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 - 3/6/2023 physical exam states, "See attached med list." Medication list dated 2/14/2023, included, "Albuterol 2.5 mg/3 ml (0.083% inh neb soln), use 3 ml via nebulizer 3 times a day x2 days then q 4 hours prn.</p> <p>Medication was not included on the MAR.</p> <p>No order to discontinue 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><i>I created a reminder note in my checklist in the client binder and I'll refer it to see checklist when I do my weekly audit.</i></p>	<p style="text-align: right;"><i>2/27/24</i></p>

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	<p>§11-100.1-17 <u>Records and reports.</u> (f)(4)                      General rules regarding records:</p> <p>All records shall be complete, accurate, current, and readily available for review by the department or responsible placement agency.</p> <p><b><u>FINDINGS</u></b>                      Resident #1 - Weight on admission assessment dated 3/7/2023 = 125 lbs. Weight record from March 2023 has resident's weight as 147 lbs. 22-pound discrepancy between admission assessment weight and weight record of the same month.</p>	<p>PART 1</p> <p><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p><i>Weight on admission was corrected 147 lbs 3/7/23</i></p>	<p><i>u 2/24/24</i></p>

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	<p>§11-100.1-17 <u>Records and reports.</u> (f)(4)                      General rules regarding records:</p> <p>All records shall be complete, accurate, current, and readily available for review by the department or responsible placement agency.</p> <p><b>FINDINGS</b>                      Resident #1 – Weight on admission assessment dated 3/7/2023 = 125 lbs. Weight record from March 2023 has resident's weight as 147 lbs. 22-pound discrepancy between admission assessment weight and weight record of the same month.</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>PCG/SCG will record weight in                      carefully + correctly in the 2/22/24                      HT + WT record and                      admission assessment. If there                      is discrepancy, reweight the                      resident with another caregiver.                      Then record the correct                      weight. To ensure this I                      obtained a calendar above                      the scale to remind me of.</p>	

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	<p>§11-100.1-86 <u>Fire safety.</u> (a)(3)                      A Type I expanded ARCH shall be in compliance with existing fire safety standards for a Type I ARCH, as provided in section 11-100.1-23(b), and the following:</p> <p>Fire drills shall be conducted and documented at least monthly under varied conditions and times of day;</p> <p><b>FINDINGS</b>                      September and October 2022 fire drill documentation not available.</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>	

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Licensee's/Administrator's Signature:

*Emelyn Ilor*

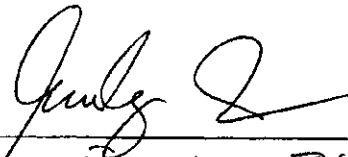
Print Name:

*Emelyn Ilor*

Date:

*2/22/24*

Licensee's/Administrator's Signature:



Print Name:

Emelyn Plat

Date:

2/27/24