State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Navarro, Rebecca (ARCH/Expanded ARCH)	CHAPTER 100.1
Address: 94-1354 Hiaai Place, Waipahu, Hawaii 96797	Inspection Date: January 2, 2024 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 PER HAR 11-100.1-3(e)(2). IF IT IS NOT RECEIVED WITHIN TEN (10) WORKING DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.

FAILURE TO CORRECT CITED DEFICIENCIES AS PER THE PLAN OF CORRECTION COULD RESULT IN REFUSAL TO RENEW YOUR LICENSE PER HAR 11-100.1-3(e)(3).

RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
§11-100.1-23 Physical environment. (g)(3)(D) Fire prevention protection.	PART 1	Date
Type I ARCHs shall be in compliance with, but not limited to, the following provisions:	Correcting the deficiency	
A drill shall be held to provide training for residents and personnel at various times of the day or night at least four	after-the-fact is not	
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;	practical/appropriate. For this deficiency, only a future plan is required.	
FINDINGS No documented evidence duration of fire drill was documented for fire drill that occurred on 5/29/23.		
	,	

 RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
§11-100.1-23 Physical environment. (g)(3)(D) Fire prevention protection.	PART 2	01/10/24
Type I ARCHs shall be in compliance with, but not limited to, the following provisions:	<u>FUTURE PLAN</u>	
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; FINDINGS No documented evidence duration of fire drill was documented for fire drill that occurred on 5/29/23.	USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT BOESN'T HAPPEN AGAIN? In the future I will use a calendar to remind me when the wot fire drill due The calendar remind me 2	
	Weeks ahead when dut 5/29/23. done. Start lime 4: pm End lime 4:03 pm	.24 JAN 24 P12 .5 9

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
	§11-100.1-86 <u>Fire safety.</u> (a)(3) A Type I expanded ARCH shall be in compliance with	PART 1	Date
	existing fire safety standards for a Type I ARCH, as provided in section 11-100.1-23(b), and the following: Fire drills shall be conducted and documented at least monthly under varied conditions and times of day; FINDINGS No documented evidence fire drills were performed on 11/2023 and 12/2023.	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
	§11-100.1-86 <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	PART 2	01/10/27
	Find Inc. Fire drills shall be conducted and documented at least monthly under varied conditions and times of day; FINDINGS No documented evidence fire drills were performed on 11/2023 and 12/2023.	FUTURE PLAN	
		USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT	
		11 DOESN'T HAPPEN AGAIN?	<u> </u>
		In the juture I used cq.	
	lendar to remind me when		
	In the juture I used cq- lendor to remind me when the next fire drell is due also I have to ask my 500 to check my chart y every- thing is filled up or complete.	,	
	also I have to ask my 500		
	to check my chart of every-		
	Thing is filled up or complete.		
		Se co	24 J
			JAN 24
		P 12	
			Ų.

Licensee's/Administrator's Signature: _	Rebucca D. Navarro
Print Name:	REBECCA D. NAVARRO
Date: _	01/18/24

STATE LIST WEING

24 JAN 24 P12:59