## STATE OF HAWAII DEPARTMENT OF HEALTH OFFICE OF HEALTH CARE ASSURANCE 601 KAMOKILA BOULEVARD, ROOM 361 KAPOLEI, HAWAII 96707

## PRELIMINARY REPORT OF ON-SITE VISIT

NAME OF FACILITY Connie's	DATE0/1/24	ANNUAL
Time In: 9:00p	Time Out: 2:00p	Vacancy: 2
SCG #1 – Darnell Battulayan SCG #2 – Rogelyn Pascual SCG #3 – Sherilyn Long	Resident #1 – Chong Choi Resident #2 – Dan Van Arsdale Resident #3 – Daniel Ogasawara	

11-100.1-3(b)(1)(I) SCG #2,3 – Two consecutive years of Fieldprint clearance unavailable

11-100.1-9(a) SCG #1 – Annual physical exam unavailable

11-100.1-9(b) SCG #1 – Initial TB clearance unavailable

11-100.1-13(d) Resident #1 – Special diet menu for "regular, chopped" not posted in dining/kitchen area

11-100.1-15(a) Pre-filled unlabeled medicine cup stored in medication cabinet

11-100.1-17(b)(3) Resident #1 – Response to medications not included in monthly progress notes

Resident #1 – Monthly progress notes unavailable from 3/2024-9/2024

11-100.1-17(b)(7)

YOR'S SIGNATURE

**OPERATOR'S SIGNATURE** 

OHCA 5/01

## Resident #2,3 – Monthly weight unavailable for 9/2024 Resident #1 – Monthly weights unavailable from 3/2024-9/2024

11-100.1-23(b)

Strong odor of human urine and cat feces emanating in living rom

11-100.1-23(g)(3)(D) 10/2023 fire drill did not include the duration of time taken to complete

11-100.1-83(a)

Resident #1 – No documented evidence special diet preparation training was provided by the resident's case manager for "regular, chopped diet" prescribed on 2/27/24

SUBVEYOR'S SIGNATURE

**OPERATOR'** SIGNATURE