

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Big Island Substance Abuse Council (BISAC) Kuakahi TLP	CHAPTER 98
Address: 169 Kuakahi Place, Hilo, Hawaii 96720	Inspection Date: May 29, 2025 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.

AUG 22 2025

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-98-12 Minimum standards for licensure; services. (2) Individual records shall be kept on each resident which contain the following:</p> <p>A report of a tuberculin skin test. If the skin test is positive, or known to be positive, there shall be documentation that appropriate medical follow-up has been obtained;</p> <p>FINDINGS Resident #1: chest X-ray for tuberculosis does not include results certified by Physician, APRN, or PA.</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>During the audit conducted on 5/29/25, conflicting documentation was identified regarding Resident #1's tuberculosis screening from Halawa Correctional Facility. The summary form in the client's chart indicated a negative PPD test performed on 10/29/24, with no chest X-ray recommended. This form corresponded with the discharge summary from Halawa Correctional Facility.</p> <p>Upon further review of the intake documents at the Transitional Living Program (TLP), it was discovered that an additional form had not been scanned into the client's file at the time of the audit. This missing document—the Interfacility Transfer/Discharge Summary completed by the RN at Halawa—confirmed that the PPD was planted on 10/29/24 and read on 11/1/24, with a result of 0mm. No chest X-ray was performed.</p> <p>The missing document has been identified and will be scanned into the client's electronic health record to ensure completeness and compliance with OHCA standards.</p>	05/29/2025

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<input checked="" type="checkbox"/>	<p>§11-98-12 Minimum standards for licensure; services. (2) Individual records shall be kept on each resident which contain the following:</p> <p>A report of a tuberculin skin test. If the skin test is positive, or known to be positive, there shall be documentation that appropriate medical follow-up has been obtained;</p> <p><u>FINDINGS</u> Resident #1: chest X-ray for tuberculosis does not include results certified by Physician, APRN, or PA.</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>To prevent documentation deficiencies and maintain compliance with OHCA licensure standards, the Intake Case Manager and Residential Coordinator will review each client's chart upon entry into the Transitional Living Program (TLP) to verify that all required documentation is complete and up to date. To further support quality assurance, the Health and Safety Manager will conduct quarterly chart audits, ensuring ongoing accuracy and adherence to regulatory requirements.</p>	05/30/2025

Licensee's/Administrator's Signature: 

Print Name: Hannah Preston-Pita

Date: 08/22/2025

AUG 22 2025