

9/5/25

Office of Health Care Assurance

State Licensing Section

# STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<b>Facility's Name: The ARC of Maui – Hale Lahaina</b>	<b>CHAPTER 89</b>
<b>Address: 5220 Kahi Street, Lahaina, Hawaii 96761</b>	<b>Inspection Date: August 27, 2025 Annual</b>

**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) WORKING DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.**

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**SEP 05 2025**

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(5) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition.</p> <p><b><u>FINDINGS</u></b> Resident #1 – “Albutenol inhaler” was ordered on 1/22/2025. Route, dosage, and frequency were not included.</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>In review of this issue, the physician wrote on the resident’s appointment slip the order of Albuterol and signed the appointment slip, but didn’t include the route, dosage, or frequency. The order was correctly sent to the pharmacy, and it was on the medication record correctly in accordance with the medication label, but there was no signed order with the complete information.</p> <p>To correct the issue, the resident manager took the physician’s order, which included the route, dosage, and frequency of the medication, to the physician for signature.</p>	<p>08/28/2025</p>

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (c)(5) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition.</p> <p><b><u>FINDINGS</u></b> Resident #1 – “Albutenol inhaler” was ordered on 1/22/2025. Route, dosage, and frequency were not included.</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>The resident manager and agency nurse were retrained by the Program Director regarding the requirement for a complete medication order document to coincide with the medication and medication record. The agency nurse will cross-reference the medications, physician orders, and the medication record for any inconsistencies or incomplete orders during the next two quarterly inspections. Monitoring documentation will be submitted to the Program Director.</p>	<p>09/05/2025</p>

Licensee's/Administrator's Signature: valerie sly

Print Name: valerie sly

Date: Sep 5, 2025

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