STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 12G040	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 06/05/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OPPORTUNITIES AND RESOURCES, INC (HOUSE 3-A)	**64-1510 KAMEHAMEHA HIGHWAY , WAHIAWA, Hawaii, 96786**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
E0000	Initial Comments The facility met the Health Safety Requirements of Appendix "Z"; in accordance with 42 CFR §483.475, Condition of Participation for Intermediate Care Facilities for Individuals with Intellectual Disabilities, Emergency Preparedness.	E0000		
W0000	INITIAL COMMENTS A focused fundamental Recertification survey was conducted by the Office of Healthcare Assurance on 06/03/26 to 06/05/26. The facility was found not to be in substantial compliance with the requirement at 42 CFR §440.150, Subpart I, Condition of Participation (CoP) for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID). Survey Dates: 06/03/26 to 06/05/26 Survey Census: 4 Clients Sample Size: 2 Clients	W0000		
W0190	STAFF TRAINING PROGRAM CFR(s): 483.430(e)(2) For employees who work with clients, training must focus on skills and competencies directed toward clients' developmental, This STANDARD is NOT MET as evidenced by: Based on observations, interviews, and record reviews, the facility failed to provide staff with the developmental programming principles and techniques training to adequately help one of two clients (clients (C), 1) sampled for active program. This deficient practice puts clients at risk from not achieving their highest capability. Findings Include: C1 is a 58-year-old female admitted to the facility on	W0190		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See reverse for further instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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W0190	Continued from page 1 10/30/04 with a diagnosis of but not limited to profound intellectual disability, autistic spectrum disorder, general idiopathic epilepsy, and sever expressive dysarthria. On 6/03/26 at 09:00 AM, review of C1's Active Treatment Program list included "social interactions" and "recreational and leisure activities." In C1's annual psychological summary completed on 07/01/25, recommendations were to continue efforts to expand C1's range of recreational/leisure interest and include interests as options to keep her attention constructively occupied. On 06/04/26 at 06:30 AM, observed C1 sitting on the chair in the living room with magazine in one hand and not engaged in any activity. When another resident started acting out due to the television remote not working, C1 secluded herself in her room and laid down in her bed until she was prompted by R20 to get up and get ready to walk down to the classroom at 07:45 AM. Concurrent interview with Reliever (R) 20 noted that C1 likes to isolate herself in her room whenever the other clients act out. R20 did not engage C1 in any activities noted in her active treatment program from 06:30 AM to 07:45 AM. R20 verbalized that she was not normally assigned to this home and was only covering for another reliever. On 06/04/26 at 08:30 AM, interview with Case Manager (CM) 1, noted that R20 should have been trained on C1's active program so that she is knowledgeable of the C1's needs and how to address her behavior. When CM1 was asked to provide documentation of R20's and R15's training on C1's active program, documentation could not be provided. On 06/05/26 at 09:15 AM, interview with Program Coordinator (PC) confirmed that R20 was not trained on the client's active programs that resided in home 3A. PC also acknowledged that there were no training records of R15 being trained on C1's active program. PC stated that she was not made aware that a reliever had called out that morning and that if she had been notified of the situation, she would have scheduled a reliever who was already familiar and trained on the active programs of the clients in home 3A. PC acknowledged that it was important for the relievers to know the client's active plans to adequately provide them with activities to address their behaviors.	W0190		

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W0249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1) As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan. This STANDARD is NOT MET as evidenced by: Based on observations, interviews, and record reviews, the facility failed to consistently implement components of the active treatment program to support the achievement of identified objectives for two of two clients (Clients, (C), 1 and 3) in the survey sample. This deficient practice led C1 and C3 to spend most of their time in their room at home, and left C1 most of the time in an adjacent room laying down and not participating in classroom activities while at the day program. Findings include: 1) C1 is a 58-year-old female admitted to the facility on 10/30/04 with a diagnosis of but not limited to profound intellectual disability, autistic spectrum disorder, general idiopathic epilepsy, and sever expressive dysarthria. On 6/03/26 at 09:00 AM, review of C1's Active Treatment Program list included "social interactions" and "recreational and leisure activities." In C1's annual psychological summary completed on 07/01/25, recommendations were to continue efforts to expand C1's range of recreational/leisure interest and include interests as options to keep her attention constructively occupied. On 06/03/26 at 10:30 AM, observed C1 laying in bed in the room adjacent to the classroom, holding a magazine in one hand. When greeted, C1 covered her face with both hands and turned to face the window. Teacher (T) 1 tried encouraging C1 to get up, but C1 just laid bed until 10:45 AM when T1 came back to the room and encouraged her to get up. C1 then stood up, walked to the classroom, and sat on the chair in front of the DVD player for about 30 seconds then went back to the other room and laid back down. Concurrent interviews with T1 noted that C1 brings the magazine everywhere she goes to prevent her from putting her hands in her mouth. T1 also noted that C1 likes to lay down most of the time and needs re-encouraging to get up and do	W0249		

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W0249	Continued from page 3 activities. At 10:50 AM observed C1 laying down and left alone with no further re-encouraging from T1 or other staff to get up and do other activities. At 11:30 AM, T1 came back and instructed C1 to get up and get ready for lunch. On 06/04/26 at 06:30 AM, observed C1 sitting on the chair in the living room with magazine in one hand and not engaged in any activity. When another resident started acting out due to the television remote not working, C1 secluded herself in her room and laid down until R20 prompted C1 to get up and get ready to walk down to the classroom at 07:45 AM. Concurrent interview with Reliever (R) 20 noted that C1 likes to isolate herself in her room as her coping mechanism. R20 verbalized that she was not normally assigned to this home and was only covering for another reliever. C1 was not engaged in any activity from 06:30 AM to 07:45 AM. On 06/04/26 at 08:00 AM, record review of C1's positive behavior support plan noted a target behavior of not putting hands in her mouth while at home and at the day program. Suggested activities to prevent this behavior are to have C1 engage in activities such as drawing, working with memory cards, giving her something to hold, and watching DVDs. Review of the intervention record for this behavior noted that for the month of March, C1 had a total of 44 incidents of putting her hand in her mouth at home and 51 incidents at the day program. For the month of April, C1 had 40 incidents of this behavior at home and 45 incidents at the day program. Review of C1's active treatment plan schedule also noted that from Sunday to Saturday at 07:00 AM, C1 is to have individualized training. On 06/04/26 at 08:30 AM, interview with Case Manager (CM) 1 and CM2 noted that they do audits on a monthly basis to ensure that the active treatment plan is being implemented but acknowledged that the teachers are doing their best to encourage activities, however, they are not able to do individualized activities as they are short of staff. CM2 stated that the ratio to one teacher and client is one to twelve, which makes it difficult to do one-on-one activities with the clients. They also do their best to train other relievers on each client's active program, but it is hard when the staff are also pulled to do other duties. Both agreed that if the activities were implemented and the positive behavior plan was carried out, then the frequency of the target behavior would decrease. On 06/05/26 at 08:00 AM, review of the facility's "Services provided by Opportunities & Resources,	W0249		

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W0249	Continued from page 4 Inc." policy, noted in the "Active Treatment" section, it states, "The active treatment plan will be individualized to meet the specific needs of each client and will include activities to develop the client's optimum level in physical, emotional, personal, and social functioning. The active treatment plan will include: 1. The individual's regular participation in an individualized plan of care…" In the "D. Day Program Services," section, it reads, "All participating clients will be serviced through a day activity training program for six hours a day, seven days a week…" In the "E. Residential Facility Services," section, it states, "…aside from providing the basic room and board, each residential facility will integrate the active treatment plan developed for each client with the day program activities." 2) On 06/03/26 at 03:39 PM, observed the clients in the home sitting at the dining table having an afternoon snack of a juice box and a packaged cake. C3 ate her snack and went to her room and shut the door. Music could be heard playing in her room. R5 went to the closed door and asked C3 to come out of her room, but C3 said, "no" with a loud voice. R5 said to the surveyor, she is refusing, this is her attitude. Later C3 came out of her room and said she wanted to watch Tom and Jerry on the television (TV). R5 turned the TV on but was not able to turn the show on that C3 wanted to watch, saying that the remote is not working and it needed batteries. C3 became upset and said, "change the batteries" in a loud voice to R5. C3 went back into her room and stayed there with the door shut with music playing inside her room. At 04:30 PM, C3 came out of her room and asked R5 if she changed the batteries, saying that she wanted to watch Tom and Jerry. R5 tried working with the remote a second time and was not able to turn on the show for C3. Random observations continued of C3 asking to watch Tom & Jerry and when batteries would be changed in the remote. On 06/03/26 at 04:55 PM, C3 came out of her room again to get her dinner plate and went to sit at the dining table. C3 proceeded to eat her meal of chicken, salad, Jello and rice very fast. C3 did not interact with her peers or the staff while at the table, and the staff and peers did not interact with C3. R5 asked C3 to eat slower on two occasions. C3 put large pieces of chicken in her mouth and finished her meal at 05:10 PM and then went into her room. When R5 was asked if C3 always stays in her room, R5 said, "sometimes".	W0249		

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W0249	Continued from page 5 On 06/05/26, review of C3's Active Treatment Plan schedule on 06/05/26 noted: On Wednesday's at 03:30 PM to 04:00 PM and 06:30 PM to 07:30 PM is individual training program. Between 03:00 PM and 07:00 PM, C3 was observed to spend most of her time in her room with the radio on. C3 participated in a walk after dinner and asked to watch Tom and Jerry on the TV several times. Review of the Quarterly Case Manager (CM)/ Qualified Intellectual Disabilities Professional (QIDP) Progress report dated February 2026 to April 2026. Active Treatment Expressive Language #1 Goal: C3 will increase her ability to express her thoughts and feelings, using an appropriate tone of voice in 75% of all trials for one calendar month in the Day Program (DP) and Residential facility (RF). C3 could not meet a step in her Expressive Language #1 Program and RF. C3 requires a lot of cues, prompts and reminders from her trainers so she can meet more steps. Table Manners (RF) Goal: C3 will be able to improve her ability to learn appropriate eating and table manners in 70% of all trials for one calendar month. This training is conducted in the Residential Facility (RF). Chew her food slowly with her mouth closed, independently. C3 could not meet a step in her Eating Table manners RF Program during this review period. C3 continues to require verbal cues, prompts, and encouragement from her trainer to improve her eating/ table manners and be able to meet more steps in the next period. On 06/05/26 at 12:30 PM, interviewed the CM1 and CM2 in the conference room. When asked what interventions the staff are expected to be doing to follow the active treatment plan for C3, for example expressive speech, the CM1 said, they should talk with the client, say "this one is not good, don't do it again". When asked if they are supposed to be assisting C3 with activities to keep her busy like her cards, or writing, both said C3 is independent, but staff could assist her to use her cards or help her with writing. When asked if R5 and R10 were trained on C3's active treatment plan, they said they did not think R10 has been trained since she is new, but R5 should have been trained and that there has been some short staffing so she may have been filling in.	W0249		
W0332	NURSING SERVICES CFR(s): 483.460(c)(1) Nursing services must include participation as appropriate in the development, review, and update	W0332		

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W0332	Continued from page 6 of an individual program plan as part of the interdisciplinary team process. This STANDARD is NOT MET as evidenced by: Based on observation, interview and record reviews, the facility did not develop health plans for problems identified in the nursing assessment summary for one of two clients (Clients (C) 1) in the active case sample. This deficient practice puts clients at risk for not having other medical conditions not addressed. Findings Include: Findings Include: On 06/03/26 at 10:30 AM, observed C1 lying in bed in the room adjacent to the classroom, holding a magazine in one hand. C1's right hand was noted with redness and bruising. When Teacher (T) 1 was asked what happened to C1's hand, T1 stated that C1 often scratches her hands and is currently taking medication for it. On 06/03/26 at 01:00 PM review of C1's Nurse's Quarterly Physical Assessment Summary noted that C1 had mild erythematous rash noted on the right and left lower leg, with skin intact and with no open areas or drainage. C1 is currently prescribed ointment for affected areas. C1 was also noted to have visited the ED (Emergency Department) on 03/06/26 for rash assessment. In the "Health Maintenance Plans" section of the summary it noted seizure disorder, constipation, aspiration precaution, potential risk for falls, dental/gum disease, and insomnia. Review of C1's individualized health plans found no health plan developed for constipation, dental/gum disease, insomnia, and skin issues. On 06/04/26 at 09:15 AM, interview with Registered Nurse (RN) confirmed that there was no health plan developed for dental/gum disease, insomnia, constipation as noted in her summary plan and acknowledged that a health plan for C1's skin issue should have also been developed. RN stated that development of C1's health plans is important as it dictates her medical needs and care. On 06/05/26 at 09:00 AM, review of the facility's "Nursing instructions for Nursing Assessment" policy, in the "Nursing Diagnosis" section, it reads, "include all physical disabilities, chronic medical conditions, and frequently recurring acute problems. Address other areas of nursing needs on Nursing Assessment Addendum VI…" In the "Nursing Care	W0332		

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W0332	Continued from page 7 Plan" section, it states, "list number of occurrences in relation to meeting objectives for all chronic problems…list nursing intervention, its effect as it relates to nursing diagnosis, including recommendation and status of follow-up."	W0332		