STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Rodriguez Care Home	**CHAPTER 100.1**
Address: 1647 Paaaina Place, Pearl City, Hawaii 96782	**Inspection Date: March 23, 2023 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.

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-9 Personnel, staffing and family requirements. (b) All individuals who either reside or provide care or services to residents in the Type I ARCH shall have documented evidence of an initial and annual tuberculosis clearance. **FINDINGS** Substitute Care Giver (SCG) #1 and Household Member (HM) #1 – No initial (2-Step) tuberculosis clearance.	**PART 1** **DID YOU CORRECT THE DEFICIENCY?** **USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY** Substitue Care Giver #1 obtained a copy of their completed 2-Step tuberculosis clearance from Lanakila Health Center. A copy of their 2-step tuberculosis clearance has been filed in the Care Home binder. Household member #1 completed the 2-step tuberculosis clearance on March 31, 2023. A copy of the 2-step tuberculosis clearance has been filed in the Care Home binder.	April 4, 2023 March 31, 2023

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-9 Personnel, staffing and family requirements. (b) All individuals who either reside or provide care or services to residents in the Type I ARCH shall have documented evidence of an initial and annual tuberculosis clearance. **FINDINGS** Substitute Care Giver (SCG) #1 and Household Member (HM) #1 – No initial (2-Step) tuberculosis clearance.	**PART 2** **FUTURE PLAN**	
		The PCG will be in charge to double check and ensure that all clearances are available.	March 24, 2023
		The PCG will check on a quarterly basis to ensure that all clearances are available.	March 24, 2023
		The PCG will have another Substitute Care Giver double check and ensure that no clearance is missing.	March 24, 2023
		The PCG will incorporate utilizing a calendar, a checklist, and a second set of eyes when checking clearances on a quarterly basis.	March 24, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-15 Medications. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN. **FINDINGS** Resident #1 – Medication orders from 9/1/2022 included, "Acetaminophen 235 mg, 2 tabs orally every 6 hours as needed for fever or pain." Medication administration record (MAR) stated, "Acetaminophen 325 mg, 2 tabs orally every 6 hours as needed for fever or pain." Medication order and MAR did not match. Type text here	**PART 1** **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
☒	§11-100.1-15 Medications. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN. **FINDINGS** Resident #1 – Medication orders from 9/1/2022 included, "Acetaminophen 235 mg, 2 tabs orally every 6 hours as needed for fever or pain." Medication administration record (MAR) stated, "Acetaminophen 325 mg, 2 tabs orally every 6 hours as needed for fever or pain." Medication order and MAR did not match.	**PART 2** **FUTURE PLAN** **USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?** In the future, whenever we write medication orders down, the PCG and Substitute Care Giver will double check and ensure that the medication order is correct. Every month, the PCG and Substitute Care Giver will check medication orders by having one read the orders, the other read the MAR and for both care givers read the label to make sure they all match.	March 24, 2023 April 1, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-17 Records and reports. (a)(1) The licensee or primary care giver shall maintain individual records for each resident. On admission, readmission, or transfer of a resident there shall be made available by the licensee or primary care giver for the department's review: Documentation of primary care giver's assessment of resident upon admission; **FINDINGS** Resident #1 – No documentation of primary care giver's assessment of resident upon 11/8/2022 readmission.	**PART 1** **Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.**	

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-17 Records and reports. (h)(1) Miscellaneous records: A permanent general register shall be maintained to record all admissions and discharges of residents; **FINDINGS** Resident #1 discharged on 11/4/2022 and readmitted 11/8/2022; however, resident register does not reflect discharge and readmission.	**PART 1** **DID YOU CORRECT THE DEFICIENCY?** **USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY** Discharge and Re-admission dates for Resident #1 has been documented in the Resident's Register.	March 24, 2023

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-17 Records and reports. (h)(1) Miscellaneous records: A permanent general register shall be maintained to record all admissions and discharges of residents; **FINDINGS** Resident #1 discharged on 11/4/2022 and readmitted 11/8/2022; however, resident register does not reflect discharge and readmission.	**PART 2** **FUTURE PLAN** **USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?** In the future, we will incorporate a checklist which will include ensuring that the Resident's Register reflects discharge and re-admission dates. We will also have another substitute care giver double check on the same day of admission that the Resident's Register reflects the discharge and re-admission dates.	March 24, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-20 Resident health care standards. (c) The primary and substitute care giver shall be able to recognize, record, and report to the resident's physician or APRN significant changes in the resident's health status including, but not limited to, convulsions, fever, sudden weakness, persistent or recurring headaches, voice changes, coughing, shortness of breath, changes in behavior, swelling limbs, abnormal bleeding, or persistent or recurring pain. **FINDINGS** Resident #1 – No documented evidence the resident's physician was notified in December 2022, regarding the resident's significant weight loss from the previous month.	**PART 1** **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
☒	§11-100.1-20 Resident health care standards. (c) The primary and substitute care giver shall be able to recognize, record, and report to the resident's physician or APRN significant changes in the resident's health status including, but not limited to, convulsions, fever, sudden weakness, persistent or recurring headaches, voice changes, coughing, shortness of breath, changes in behavior, swelling limbs, abnormal bleeding, or persistent or recurring pain. **FINDINGS** Resident #1 – No documented evidence the resident's physician was notified in December 2022, regarding the resident's significant weight loss from the previous month.	**PART 2** **FUTURE PLAN** An in-service with all the care givers were given and everyone now knows that if there is a significant weight gain or weight loss, that the physician would need to be notified. In the future, the PCG will be responsible to check the weight of the resident when the progress notes have been written. At the beginning of each month, the PCG will check the resident's weight and compare that from the previous month to see if there is a significant weight change. If there is a significant weight change, the physician will then be notified.	April 4, 2023 April 1, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-23 Physical environment. (b) The Type I ARCH shall be free of excessive noise, dust, or odors and shall have good drainage; **FINDINGS** Smoke detector above Bedroom #1 chirping.	**PART 1** **DID YOU CORRECT THE DEFICIENCY?** **USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY** The Smoke detector's back up battery was replaced.	March 24, 2023

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-23 Physical environment. (b) The Type I ARCH shall be free of excessive noise, dust, or odors and shall have good drainage; **FINDINGS** Smoke detector above Bedroom #1 chirping.	**PART 2** **FUTURE PLAN** **USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?** If Smoke Detector starts to chirp, we will investigate to see if smoke detector requires vacuuming and or if back up battery requires replacement.	March 24, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-83 Personnel and staffing requirements. (5) In addition to the requirements in subchapter 2 and 3: Primary and substitute care givers shall have documented evidence of successful completion of twelve hours of continuing education courses per year on subjects pertinent to the management of an expanded ARCH and care of expanded ARCH residents. **FINDINGS** SCG #1 – 11/12 continuing education hours completed within last year.	**PART 1** **DID YOU CORRECT THE DEFICIENCY?** **USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY** Substitute Care Giver #1 has completed the required continuing education hours.	March 28, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-83 Personnel and staffing requirements. (5) In addition to the requirements in subchapter 2 and 3: Primary and substitute care givers shall have documented evidence of successful completion of twelve hours of continuing education courses per year on subjects pertinent to the management of an expanded ARCH and care of expanded ARCH residents. **FINDINGS** SCG #1 – 11/12 continuing education hours completed within last year.	**PART 2** **FUTURE PLAN** **USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?** The PCG will keep track of the Continuing Education Hours on a quarterly basis to ensure completion of hours prior to our inspection month of March.	April 6, 2023

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	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-88 Case management qualifications and services. (c)(9) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate in collaboration with the primary care giver and physician or APRN. The case manager shall: Provide ongoing evaluation and monitoring of the expanded ARCH resident's status, care giver's skills, competency and quality of services being provided; **FINDINGS** Resident #1 – Case management services for expanded resident discontinued; however, no case management waiver obtained from the department.	**PART 1** **DID YOU CORRECT THE DEFICIENCY?** **USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY** Paperwork for Case Management Waiver was obtained and completed by all parties involved in the care management of Resident #1 and submitted to the Department of Health, OHCA Nurse Consultant Jessica Chambers.	April 6, 2023

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
☒	§11-100.1-88 Case management qualifications and services. (c)(9) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate in collaboration with the primary care giver and physician or APRN. The case manager shall: Provide ongoing evaluation and monitoring of the expanded ARCH resident's status, care giver's skills, competency and quality of services being provided; **FINDINGS** Resident #1 – Case management services for expanded resident discontinued; however, no case management waiver obtained from the department.	**PART 2** **FUTURE PLAN** **USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?** In the future, if a resident's Power of Attorney requests for Case Management Waiver to be submitted to the Office of Health Care Assurance, the PCG will be responsible on ensuring that all forms required based on the Waive Case Management Checklist is complete prior to submission. The PCG will also have a Substitute Care Giver double check that all forms required based on the Waive Case Management Checklist is complete prior to submitting the paperwork to the Office of Health Care Assurance.	April 6, 2023 April 6, 2023

Licensee's/Administrator's Signature: _____

Print Name: Reina Lyn Sahagun

Date: April 6, 2023