Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Kuakini Home	**CHAPTER 100.1**
Address: **347 North Kuakini Street, Honolulu, Hawaii 96817**	**Inspection Date: November 7, 2024 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
☒	§11-100.1-15 Medications. (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms. **FINDINGS** Resident #1 – Physician order dated 10/28/24 for Senna S tablet 8.6-50 mg reads: give 2 tablets by mouth every 12 hours as needed for constipation. However, medication label reads: give 1 tab twice daily. Physician order and medication label do not match.	**PART 1** **DID YOU CORRECT THE DEFICIENCY?** **USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY** Resident #1 (R1)'s Senna S bottle was relabeled by the Plaza Pharmacy to "Senna S tablet 8.6-50 mg: give two tablets by mouth twice daily as needed for constipation."	11/15/2024

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☒	§11-100.1-15 Medications. (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms. **FINDINGS** Resident #1 – Physician order dated 10/28/24 for Senna S tablet 8.6-50 mg reads: give 2 tablets by mouth every 12 hours as needed for constipation. However, medication label reads: give 1 tab twice daily. Physician order and medication label do 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?** 1.The Physician Orders will be reconciled with the medication labels for every order change by the License Nurse (LN) on duty. All medications, including new or recently adjusted medications, will be sent to the Plaza Pharmacy for labelling. A second LN will verify the medication label upon receiving the medications from the Plaza Pharmacy. 2.All Kuakini Home Licensed Nurses will be reeducated by the Nursing Home Administrator, Director of Nursing – Long Term Care, or designee on medication labelling and carrying out orders. 3.The Nursing Home Administrator, Director of Nursing – Long Term Care, or designee will complete a monthly audit of all medication labels for accuracy and completion and report the findings to the Vice President of Nursing Services to ensure compliance.	11/20/2024

Licensee's/Administrator's Signature: David Abe

Print Name: David Abe

Date: Nov 19, 2024