## Foster Family Home - Corrective Action Report

**Provider ID:** 4-621228

**Review ID: Home Name:** Roseminic Ulep, CNA 4-621228-12

360 Hilu Place Reviewer: Terri Van Houten

Kahului HI 96732 Begin Date: 5/10/2021

**Foster Family Home** [11-800-6] **Required Certificate** 

6.(d)(1)Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Unannounced annual home inspection for 3 bed CCFFH. Report issued during home inspection with written plan of correction due to CTA by 6/10/2021.

Foster Family F	lome	Background Checks	[11-8	300-8]
8.(a)(1)	Be subject to criminal history record checks in accordance with section 846-2.7, HRS;			
8.(a)(2)	Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and			
Comment:				

8.(a)(1) - CG#1, CG#2, and CG#3 did not have a current eCrim report in their file.

8.(d)(2)(A) - CG#1 did not have a current APS/CAN in their file.

3 Person Staffing 3 Person Staffing Requirements (3P) Staff

There is no provision for a three-hour or less substitute caregiver in CCFFHs with three clients in the home. If CTA (3P)(b)(3) Staff approved an SCG for three hours or less, that approval applies only for one or two clients in a home.

Comment:

(3P)(b)(3) Staff - CG#4 and CG# 5 did not have evidence or validation of work experience in their file. Both CGs had a CTA approval allowing them to work in a 1-2 client CCFFH only.

**Foster Family Home Client Care and Services** [11-800-43]

Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may 43.(c)(3)

delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3) - Client #1-RN delegations from 2020 were not signed by the RN, CG#1 and CG#2.

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## 3 Person Fire Safety, 3 Person Fire Safety (3P) Fire **Natural Disaster** (3P)(b)(1) Fire shall be conducted monthly (3P)(b)(6) Fire shall include all SCGs at least once per year (3P)(e)(4) Fire A fire sprinkler system shall be installed. At a minimum, and approved NFPA 13-D automatic sprinkler system shall be installed in the home. Comment: (3P)(b)(1) Fire - Last documented fire drill was from 9/2020. (3P)(b)(6) Fire - CCFFH did not have evidence that CG#3 or CG#4 had conducted a fire drill in the last 12 months. [11-800-51] **Foster Family Home Insurance Requirements** 51.(a)(1) General; Comment: 51.(a)(1) - CCFFH did not have an up to date copy of the liability insurance. (Expired 11/30/20) **Foster Family Home Fiscal Requirements** [11-800-52] 52.(b) The home shall maintain fiscal records, documents and other evidence that sufficiently and properly reflect all funds received, and all direct and indirect expenditures of any nature related to the home's operation. Comment: 52.(b) - CCFFH did not have a current budget documented for 2021 **Foster Family Home Client Rights** [11-800-53] 53.(b)(15) Have daily visiting hours and provisions for privacy established; Comment:

53.(b)(15) - CCFFH has limited visiting hours. Per federal regulations, "My Choice, My Way", visiting hours cannot be restricted.

Foster Family Home Records [11-800-54]

54.(c)(5) Medication schedule checklist;

Comment:

54.(c)(5) - Client #2 MAR last documented on 5/8/2021.

Compliance Manager

Primary Care Giver

5/10/2/ Date 10/2