

Foster Family Home - Deficiency Report

Provider ID: 1-110057

Home Name: Angelina Madrid, NA

Review ID: 1-110057-10

530 Kani-ahe Street

Reviewer: Maribel Nakamine

Wahiawa

HI 96786

Begin Date: 7/15/2021

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

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

Comment:

Unannounced recertification inspection for a 2 person CCFFH completed.

Deficiency Report issued during CCFFH inspection with a written plan of correction due to CTA on 8/15/2021.

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5)- No confidentiality policies and procedures and client privacy rights training for CG#4 and HHM#3.

Foster Family Home Fire Safety [11-800-46]

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(b)(2)- CG#2, CG#4, and CG#5 were without evidence of having conducted a monthly fire drill for the past 12 months.

Foster Family Home Quality Assurance [11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a)- CG#2, CG#3, CG#4, CG#5, and CG#6 were without evidence of having had the CCFFH's Emergency Preparedness Plan training.

Maribel Nakamine, RN

Compliance Manager

Angelina Madrid

Primary Care Giver

7/15/2021

Date

7/15/2021

Date

CTA RN Compliance Manager: Maribel Nakamine

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate: Angelina B. Madrid

(PLEASE PRINT)

CCFFH Address: 530 Kahi Ahe St. Wahiawa HI 96786

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
16.(b) (5)	CG#4 and HHM#3 read and signed the confidentiality policies and procedures and client privacy rights training.	7/20/21	Every 2nd of the month I will check my CCFFH binder to make sure every caregivers and HHM are properly trained with their signature and the forms are filed properly in the binder.
46.(b) (2)	CG#2 conducted the training on [REDACTED], CG #4 conducted the training on [REDACTED] and CG #5 is scheduled to conduct the training on [REDACTED].	7/16/21, 08/01/21	I created a schedule and wrote in my planner to conduct the monthly fire drill every 1st of the month.
50.(a)	CG#2, CG#3, CG#4, CG#5, and CG#6 signed the CCFFH's Emergency Preparedness Plan training.	7/16/21	Every 2nd of the month I will check my CCFFH binder to make sure all caregivers are properly trained with their signature and the forms are filed properly on the binder.

All items that were fixed are attached to this CAP

PCG's Signature: AMadrid

Date: 8/3/21

CTA has reviewed all corrected items