

Foster Family Home - Deficiency Report

Provider ID: 1-582248

Home Name: Ma Lournalee Asuncion, CNA

Review ID: 1-582248-10

98-544 Kaamilo Street

Reviewer: Maribel Nakamine

Aiea HI 96701

Begin Date: 8/10/2021

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 3 person CCFFH completed.
Deficiency Report issued during CCFFH inspection with all items due to CTA within 30 days

Foster Family Home Medication and Nutrition [11-800-47]

47.(b) The caregivers shall obtain training, relevant information, and regular monitoring from the client's physician, a home health agency, as defined in chapter 11-97, or a Registered nurse for all medication that the client requires.

Comment:

47.(b) Client # 1: No list of medication side effects was available in the client binder

Foster Family Home Physical Environment [11-800-49]

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

49.(b)(3) Be in close proximity to the primary or substitute caregiver for timely intervention for nighttime needs or emergencies, or be equipped with a call bell, intercom, or monitoring device approved by the case management agency.

Comment:

49.(a)(4) On the day of inspection, the wheelchair ramp to the exit door was obstructed with boxes, walker and shoes, An emergency exit of the home would require additional time to move these items

49.(b)(3) The CG's bedroom is upstairs away from the client. 2 client rooms have [REDACTED], 1 client room does not (client # 3) For client # 3 there is no system in place for the client to call for assistance. CG makes rounds during the nighttime.

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

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

50.(e)(1) Reviews of administrative, fiscal, personnel, and client records;

50.(e)(2) Inspection of service sites;

Comment:

50.(e),(1),(2)- On first inspection date of 8/5/2021, CCFFH did not cooperate with RN inspector for access to the physical inspection of the home per HAR guidelines. This required CTA to make a second unannounced inspection to complete the re-certification review.

50 (e) The front door to the CCFFH has a locked screen. There is no doorbell or ability to knock on the door to alert the CG that inspectors / visitors are at the door.

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Records

[11-800-54]

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

Comment:

54.(c)(5) Medication discrepancy for client # 2 medication prescription label [REDACTED] did not match medication administration record and / or the signed MD orders.



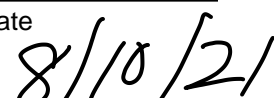
Compliance Manager



Date



Primary Care Giver



Date