

Foster Family Home - Deficiency Report

Provider ID: 6-180059

Home Name: Arsenia Masiglat, NA

Review ID: 6-180059-7

425 Kikipua Street

Reviewer: Terri Van Houten

Kaunakakai HI 96748

Begin Date: 8/24/2021

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

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

Comment:

6.(d)(1) - Unannounced annual home inspection for 2 bed CCFFH. Report issued during home inspection with written plan of correction due to CTA by 9/24/2021.

Foster Family Home Background Checks [11-800-8]

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 did not have a current eCrim report in their file.

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

Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with section 11-800-7.(b)(2).

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

41.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

Comment:

41.(b)(4) - CG#2 and CG#3 did not have a disclosure form on file.

41.(b)(7) - CG#1 and CG#2 did not have a current TB clearance on file

41.(b)(8) - CG#1, CG#2 and CG#3 did not have evidence of current training on Bloodborne pathogens and infection control.

41.(e) - CG#3 did not have a current state ID on file.

Foster Family Home - Deficiency Report

Foster Family Home

Fire Safety

[11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

46.(a) - CCFFH did not have evidence that monthly fire drills were being conducted. The last documented fire drill was from 7/2020.

Foster Family Home

Records

[11-800-54]

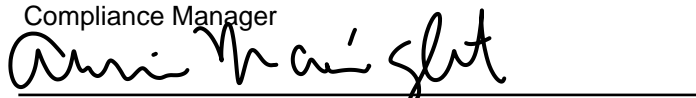
54.(c)(5) Medication schedule checklist;

Comment:

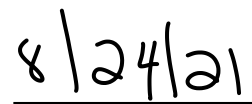
54.(c)(5) - Client #1 and client #2 did not have a current MAR for August 2021 started. Last MAR documented for both clients was from 7/27/21.



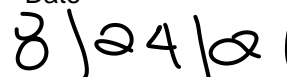
Compliance Manager



Primary Care Giver



Date



Date