

Foster Family Home - Deficiency Report

Provider ID: 1-200061

Home Name: Debbie-Cherelle Rasalan
Alcala Inay, CNA

Review ID: 1-200061-3

2516 Rose Street

Reviewer: Julie Hastings

Honolulu HI 96819

Begin Date: 10/5/2021

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

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

Comment:

6.(d)(1)
Home inspection completed for a 2 person CCFFH recertification
Corrective Action Report issued during home inspection with all approved written corrections due to CTA by 11/5/2021

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;

Comment:

8.(a)(1)
CG#4 does not have fingerprints.
CG#4 does not have eCrim

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 privacy/confidentiality training for CG#1, CG#2, CG#3, CG#4, CG#5, HHM#2, HHM#3

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

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(f)(1)
No TB or declination form for 2 minors.

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

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3)
No delegation for CG#3 for Client #1.

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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)
No Fire Drills for CG#2, CG#3 or CG#4 in 2021

Foster Family Home

Insurance Requirements

[11-800-51]

51.(a)(1) General;

Comment:


51.(a)(1)
CG#2, CG#3, CG#5 not on liability insurance.



Compliance Manager

10/5/2021

Date


Primary Care Giver

10/5/2021

Date