

Foster Family Home - Deficiency Report

Provider ID: 1-190086

Home Name: Ailene Mabanag, CNA

Review ID: 1-190086-5

94-332 Kahualena Street

Reviewer: Jackie Chamberlain

Waipahu HI 96797

Begin Date: 9/20/2021

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

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

Comment:

6(d)(1) CCFFH inspection made for a 2 bed re-certification.

Deficiency Report issued during CCFFH visit with corrective action plan due to [REDACTED] within 30 days of inspection.

Increase to 3 client CCFFH approved

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

47.(d)(1) By order of a physician;

Comment:

47.(d)(1) Unable to locate a diet order for client # 1 or 2 with discrepancies of the clients current diet throughout the service plan

Foster Family Home Client Rights [11-800-53]

53.(b)(7) Not be humiliated, harassed, or threatened, and be free from physical and chemical restraints. Physical and chemical restraints may be used as specified in section 11-800-47(d);

Comment:

53.(b)(7) No order for [REDACTED] for client # 1 or 2

Foster Family Home Records [11-800-54]

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

54.(c)(7) Expenditure records; and

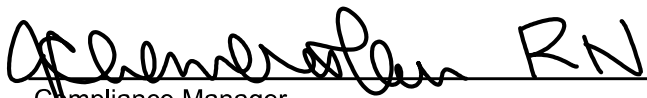
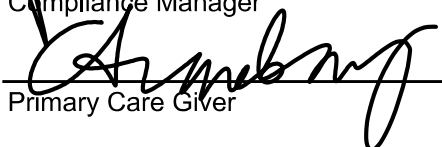
54.(c)(8) Personal inventory.

Comment:

54.(c)(2) Service plan for clients #1 and # 2 have discrepancies between the written service plan, the MD order, and the actual CCFFH practice

54.(c)(7) Resident account record is not present for client # 1 or 2

54.(c)(8) Personal inventory is not present for client # 1


Compliance Manager

Primary Care Giver

9/20/21
Date
9/20/21
Date

CTA RN Compliance Manager: Jackie Chamberlain

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

PCG's Name on CCFFH Certificate: Ailene Mabanag
(PLEASE PRINT)

CCFFH Address: 94-332 Kahualena St., Waipahu, HI 96797
(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?
47.d.1	Diet orders for Clients 1 & 2 were corrected by CMA, MD and █CG. Orders are now placed in each of Client's file. PCG will use a calendar to remember to review the personal belongings list.	9/22/21 9/27/21	█CG will be sure to have such important orders from MD to ensure that diet for each Client is precise and updated. █CG/█CG will immediately notify CMA and MD should there be any changes.
53.d.7	█ for Clients 1 & 2 were corrected by CMA, MD and █CG. Orders are now placed in each of Client's file.	9/22/21 9/27/21	█CG will be sure to have these orders to ensure that service plans for all Clients are correct and followed. █CG/█CG will immediately notify CMA and MD should there be any changes.
54.c.2	Service plan discrepancies for Clients 1 & 2 were corrected by CMA and █CG. MD orders are now placed in each of Client's file to reflect service plan.	9/22/21 10/6/21	PCG will be sure to review service plan for each Client is accurate to reflect all MD orders to avoid discrepancies and to be sure service plan is followed accordingly. █CG/█CG will immediately notify CMA and MD should there be any changes.
54.c.7	Resident account record was completed and signed by Client's 1 and 2. Records are placed in each of Client's file.	10/1/21	█CG will ensure that account records for each Client is monitored monthly. █

All items that were fixed are attached to this CAP

PCG's Signature: *A Mabanag*

Date: 10/8/2021

CTA has reviewed all corrected items

CTA RN Compliance Manager: Jackie Chamberlain

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

PCG's Name on CCFFH Certificate: Ailene Mabanag
(PLEASE PRINT)

CCFFH Address: 94-332 Kahualena St., Waipahu, HI 96797
(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?
54.c.8	Personal inventory was completed and signed by Client 1's [REDACTED]	9/22/21	[REDACTED] CG will be sure to do inventory of Client's personal belongings on the day of admission. [REDACTED] CG/SCG will also ensure to update the record should there be any changes. [REDACTED] CG will use a calendar to remember to review the personal belongings list.

All items that were fixed are attached to this CAP

PCG's Signature: *Aemabanag*

Date: 10/8/2021

CTA has reviewed all corrected items