

# Foster Family Home - Deficiency Report

Provider ID: 1-180089

Home Name: Maricel Napoles, CNA

Review ID: 1-180089-6

94-527 Palai Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 10/8/2021

## 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 recertification inspection conducted.

Deficiency Report issued during CCFFH inspection with a written plan of correction due to CTA on 11/8/2021.

CG requests to increase to a 3 client CCFFH.

## 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.

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

Comment:

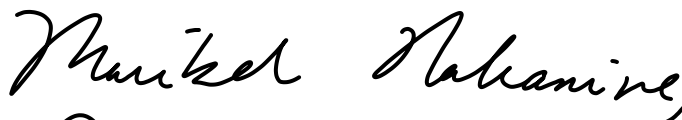
46.(a), (b)(2)- No nighttime monthly fire drill conducted. CG#5 without evidence of having conducted a monthly fire drill for the past 12 months.

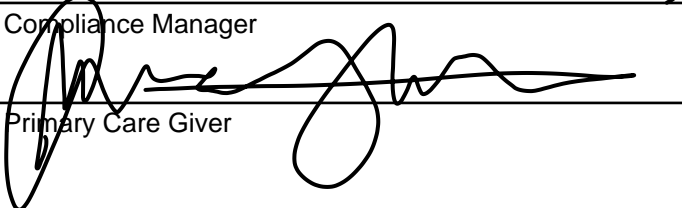
## Foster Family Home Records [11-800-54]

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

Comment:

54.(c)(5)- Medication discrepancy noted for Client #2. One medication's label did not match the MD's order and the Medication Administration Record(MAR).

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

Date 10/8/2021  
Date 10/8/2021

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: Maricel Napoles  
(PLEASE PRINT)

CCFFH Address: 94-527 Palai Street 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?   |
|--------------|---|-------------------------------|---|
| 46.a.b.<br>2 | Conducted nighttime fire drill for CG#5 nad placed it in CCFFH binder.  | 10/9/21                       | CG#1 must make sure that all caregivers must participate with a monthly fire drill with a diffrent time of the day and will use wall calendar to put a reminder that it needs to be done monthly. |
| 54.c.5       | CG#1 called PCP and clarified MD's Order to match the Medication Administration Record (MAR) for Client#2 and has been updated. | 10/12/21                      | CG#1 to check and make sure MD Order's and Medication Administration Record (MAR) must matched to prevent future discrepancy.   |

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10/15/21

CTA has reviewed all corrected items