

Foster Family Home - Deficiency Report

Provider ID: 1-150048

Home Name: Jason Arrocena, CNA

Review ID: 1-150048-9

94-123 Awaia Street

Reviewer: Julie Hastings

Waipahu HI 96797

Begin Date: 9/13/2021

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 3 person CCFFH recertification.

Home inspection completed for a 3 person CCFFH recertification

Corrective Action Report issued during home inspection with all approved written corrections due to CTA by 9/13/2021.

CCFFH requesting to increase to 3 clients.

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)

8.(a)(2)

HHM's #2-#3, #4, #5, #6, #7, #8, #9 have no fingerprint, APS/CAN, or Ecrim on record

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)

HHM#2, #3, #4, #5, #6, #7, #8, #9 have not signed privacy/confidentiality agreement.

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

41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41.(c) CG#1 has only 4 hours training in 2020, CG#2 has no training in 2020

41.(f)(1)

HHM#2, #3, #4, #5, #6, #7, #8, #9 have no TB clearance PPW

Foster Family Home - Deficiency Report

3 Person Staffing

3 Person Staffing Requirements

(3P) Staff

(3P)(a)(4) Staff A current Certified Nurses Aide or Nurse Aide certificate plus one year of experience in a home setting. If the certificate is expiring within the next 30 days, evidence of a new certificate must be provided. Substitute caregivers have a minimum of one year work experience as a caregiver in a community residential setting or in a medical facility, per 321-483(b)(4)(E) HRS.

Comment:

(3P)(a)(4) Staff
CG#2 has no work experience in Binder. No 3 client approval yet.

3 Person Fire Safety, Natural Disaster

3 Person Fire Safety

(3P) Fire

(3P)(b)(1) Fire shall be conducted monthly

Comment:

(3P)(b)(1) Fire
no 2020 or 2021 Fire drills. last recorded was 9/29/19



Compliance Manager



Primary Care Giver

9/13/2021

Date

9/13/2021

Date

CTA RN Compliance Manager: Terri Van Houten RN

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

PCG's Name on CCFFH Certificate: Jason Arrocena
(PLEASE PRINT)

CCFFH Address: 94-123 Awaia 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?
8.(a)(1)	Lapse cannot be corrected HHM#2,#3,#4,#5,#6,#7,#8,#9 2021 Ecrim obtained and placed in home record.	3/6/21 10/4/21	Home will use a wall hanging notepad with due dates. CG#1 will remind 2 weeks prior due date to prevent future lapses.
8.(a)(2)	Lapse cannot be corrected HHM#2,#3,#4,#5,#6,#7,#8,#9 2021 APS/CAN and fingerprinting obtained and placed in home record.	9/29/21 9/30/21 10/01/21	Home will use a wall hanging notepad with due dates. CG#1 will remind 2 weeks prior due date to prevent future lapses.
16.(b)(5)	HHM#2,#3,#4,#5,#6,#7,#8,#9 have signed privacy/confidentiality agreement and placed in home record	10/7/21	Home privacy/confidentiality should be in home record and signed by HHMs.
41.(c)	CG#1 and CG#1 In-service training placed in home record.	9/18/21	CG will track training hours with a hanging notepad. CG will maintain all documentation of training received in home record.
41.(f)(1)	HHM#2,#3,#4,#5,#6,#7,#8,#9 2021 TB clearance obtained and placed in home record.	2/25/21 9/27/21 9/29/21	Home will use a wall hanging notepad with due dates. CG#1 will remind 2 weeks prior due date to prevent future lapses.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10/8/21

CTA has reviewed all corrected items

CTA RN Compliance Manager: Terri Van Houten RN

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

PCG's Name on CCFFH Certificate: Jason Arroccena
(PLEASE PRINT)

CCFFH Address: 94-123 Awaia 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?
(3P)(a) (4)staff	CG#2 job experience obtained, signed, and placed in home record.	10/7/21	Home will use a wall hanging notepad with due dates. CG#1 will remind 2 months prior certificates due date.
(3)(a) (4)staff	Fire drill was conducted	9/25/21	CG will make sure monthly fire drills performed by different staff during different times of the day.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10/8/21

CTA has reviewed all corrected items