

Foster Family Home - Deficiency Report

Provider ID: 1-512964

Home Name: Rosemarie Pe Benito, RN

Review ID: 1-512964-10

91-1027 Ho'ohilu Street

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 12/14/2021

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 3 bed re-certification.

Deficiency Report issued during CCFFH inspection with corrective action plan due to CTA within 30 days of inspection.

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 2 and 3 no proof of clearance for APS, CAN CG 2 no proof of current ecrim
8.(a)(1) HHM 1 has lived in the CCFFH since 7/2020 has not submitted APS CAN Fingerprints, Confidentiality

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 proof of training HHM 1 on their confidentiality policies and procedures and client privacy rights.

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

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

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

Comment:

41.(f)(1) No TB clearance for CG 1 and 2 or HHM 1

41.(b)(8) No evidence of current CPR, First aid for CG 2

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) Vital signs: No documentation vital signs per the frequency noted in the service plan

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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) No documentations of fire drills since 1/2021

Foster Family Home

Quality Assurance

[11-800-50]

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

50(e) The CCFFH has a gate at the sidewalk that lacks a communication method to the CCFFH for quick access into the CCFFH.

Foster Family Home

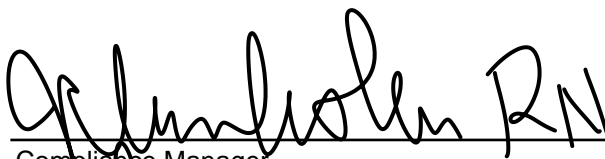
Records

[11-800-54]

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

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 and unsigned by client or POA



Compliance Manager



Primary Care Giver

12/14/21

Date

12/14/21

Date