

Foster Family Home - Deficiency Report

Provider ID: 4-624628

Home Name: Era Luczon, CNA

Review ID: 4-624628-10

97 Hoku Puhipaka Street

Reviewer: Terri Van Houten

Kahului HI 96732

Begin Date: 4/5/2022

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 home inspection for 2 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 5/5/2022.

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.

Comment:

46.(a) - CCFFH did not have evidence of fire drills conducted each month. Fire drill records were missing from February and March of 2022.

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)(5) Medication schedule checklist;

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(c)(2) - Client [redacted] did not have evidence that a Service Plan has been reviewed every 6 months. Last service plan on record was dated 4/28/21.

54.(c)(5)- CCFFH did not have evidence that a monthly MAR was completed for each client. Client [redacted] s missing the MAR from March and April 2022. Client [redacted] MAR incomplete from March 2022 and missing from April 2022.

54.(c)(6) - CCFFH did not have evidence that daily ADL flowsheet was being completed. Client [redacted] ADL flow sheet was blank for March 2022.

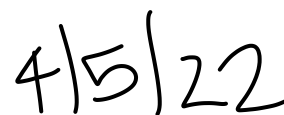
54.(c)(6) - CCFFH did not have evidence that monthly RN visits were completed. Client [redacted] s missing RN visit notes from 2/22, 3/22, 11/21 and 9/21. Client [redacted] s missing RN visit notes from 11/21, 10/21, and 6/21.



Compliance Manager



Primary Care Giver



Date



Date