

Foster Family Home - Deficiency Report

Provider ID: 1-562034

Home Name: Lydia Carpio, CNA

Review ID: 1-562034-11

94-1046 Puloku Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 6/21/2022

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 recertification inspection conducted.

Deficiency Report issued during CCFFH inspection with a written plan of correction due to CTA on 7/21/22.

10.d.3- Current certificate should be posted conspicuously in the CCFFH.

10.d.3- Current Certificate was not visibly posted within the CCFFH.

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 confidentiality policies and procedures and client privacy rights training present for C ■■■, C ■■■, C ■■■, and CG ■■■

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)- No RN delegations for ■■■■■ medications administration for C ■■■, C ■■■, C ■■■, ■■■, and C ■■■ on Client ■■■

Foster Family Home Client Account [11-800-48]

48.(a) The home shall maintain a written accounting of the client's personal funds received and expended on the client's behalf by the home.

Comment:

48.(a)- No completed Clients' Account Records present in Client #1, Client #2, and Client #3's charts.

Foster Family Home - Deficiency Report

Foster Family Home

Quality Assurance

[11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

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.(a)- C [redacted] without evidence of having had the CCFFH's Emergency Preparedness Plan training.

50.(e)- The CCFFH has a gate and "Beware of Dog" sign. No gate buzzer/intercom system present for agency/CTA to have a communication system for a quick access to the CCFFH.

Foster Family Home

Client Rights

[11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Clients' bathroom door without an approved lock from the inside. Door lock was noted to be a latched located above the door which clients were unable to access.

Foster Family Home

Records

[11-800-54]

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)(5)- Medications discrepancies noted for Client [redacted] and Client [redacted]

Client [redacted] Medication Administration Record (MAR) was last signed on [redacted]

Client [redacted] MAR was last signed on [redacted]

54.(c)(6)- ADLs/Daily Care Flowsheet for Client [redacted] was last signed on [redacted]

Maribel Nakamine, RN 6/21/22

Compliance Manager

Date

Sydney V. Curfio

Date

6/21/22