Foster Family Home - Deficiency Report

Provider ID: 1-180077

Home Name: Cherry Ancheta, CNA Review ID: 1-180077-8

91-1052 Anaunau Street Reviewer: Jackie Chamberlain

Ewa Beach HI 96706 Begin Date: 7/22/2022

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) 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 1 APS CAN expired 6/2022

Foster Family Home Physical Environment [11-800-49]

49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(c)(3) high touch areas (doors and light switches) in the client area have dirt and grime

Foster Family Home Records [11-800-54]

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

Comment:

54.(c)(5)Client # 3 Discrepancy in medication orders for BP medication: The MAR has hold parameters for low blood pressure / the prescription label does not

Compliance Manager

Primary Care Giver

Date Date

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Community Care Foster Family Home (CCFFH) Written Plan of Correction (POC) Chapter 11-800

PCG's Name on CCFFH Certificate:	CHERRY	ANN	ANCHETA
			(PI FASE PRINT)

CCFFH Address: 91-1052 ANAMNAM ST, EWA BEACH, HI 96706 (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.(9) (2)	CG I APS CAN Y/AS OBTAINED AND TAKEN ON 07/26/22 AND PLACED IN A HOME BINDER ON 8/63/22	07/24/12	HOME WILL USE A SPREADSHEET ON BINDER TO IDENTIFY WHEN REQUIREMENTS ARE DUE 2 MONTHS BEFORE EXPIRATION TO ALLOW TIME TO GET THEM PONE.
4 a.cc)(3)	CHENTS AREAS HAVE PREN CLEANED, DIRT AND GRIMED REMOYED	•	CG #1 CLEANING SCHEDUIT CHECKING HAS BEEN CREATED TO SET THES OF CLEANING AND IDENTIFIES AREAS TO BE CLEANED.
54.(c)(s)	CLIENT # 3 MEDICATION DISCREPANCY Y/AS CORRECTED BY CLIENT'S CMA, MD AND CGH. FOR CHENT'S PRESCRIPTION LABEL .	7/25/22	CG \$ 1 WILL LOOK AT ALL MEDICATION OR DER& BOTTLES AND MAR TO ENSURE ALL MATCH DEFORE GIVING ANY NEW MEDICAT HOME, WILL NOTIFY CM A, PHARMACY AND, OR DR. IF THEY ARE DIFFERENT.

V	All items tha	at were corrected are attached to this POC		i v
PCG's	Signature:	Anchite	Date:	08/01/2012

X CTA has reviewed all corrected items