

Foster Family Home - Deficiency Report

Provider ID: 1-170082

Home Name: Jovy Agcaoili, NA

Review ID: 1-170082-9

91-1076 Kuhina Street

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 7/14/2022

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 2 bed re-certification.

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

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(4) Respect client privacy rights;

Comment:

16.(b)(4) There were video cameras in Client # 1 bedroom. There were no consent forms for use of video surveillance equipment. Use of video is a violation of client privacy without written consent.

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

41.(j)(3) Authorize all substitute caregivers to permit entrance by case management agency and department staff, with or without prior notice, for the purpose of client monitoring, investigation, and quality assurance review.

Comment:

41.(j)(3)CTA arrived rang doorbell at front door. No answer. Walked to side entrance and saw client. No answer at door. Proceeded in to speak to client. Saw CG 3 was in the side property at the pool with family. Client 1 and 2 did not have a way to call for help if needed

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 delegation present for Client # 1 for oral meds and eye drop delegations Client # 2 is missing eye drop delegation

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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)(7) Expenditure records; and
- 54.(c)(8) Personal inventory.


Comment:

54.(c)(2) Service plan for clients #1 have discrepancies between the written service plan, the MD order, and the actual CCFFH practice for weight every 3 months. Service plan outdated, last 8/2021


54.(c)(5) Medication discrepancy for client # 1 medication prescription label did not match medication administration record and / or the signed MD orders.

54.(c)(7) Expenditure records are missing for client 1 and 2


54.(c)(8) Personal inventory sheet is missing for client 2




Compliance Manager

✓ 

Primary Care Giver



Date



Date

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

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

PCG's Name on CCFFH Certificate: Joy Jane Agcaoli

(PLEASE PRINT)

CCFFH Address: 9107b Kuhina 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?
16.(b)(4)	Clients POA provided written consent for the used of video camera to monitor inside their room.	7/22/2022	In the future, I will make sure to make a written consent for all video device to monitor them inside their room and make sure that client/POA/family member knows about it. And they fully understand well, what is the used of the device and they signed it and RNCM was being notified too.
41.(i)(3)	Place doorbell back to the main entrance from the side door entrance and make sure it works well. And put call bell to the client if nobody stay with them.	8/4/2022	I will make sure that doorbell works all the time and can hear inside the house. And make sure that client get call bell if nobody stay with them so they can call help all the time they needed.

All items that were corrected are attached to this POC

PCG's Signature: Joy Jane Agcaoli

Date: 8/16/22

CTA has reviewed all corrected items

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)

Chapter 11-800

PCG's Name on CCFFH Certificate: Joy Jane Agcailli

(PLEASE PRINT)

CCFFH Address: 911076 Kuhina 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?
43(c)(3)	Asked RNCM to provide deligation for client 1 and 2.	7/19/2022	In the future, I will make sure to checked with RNCM right after admission for the deligations. And always make sure to checked with RNCM too with new MD's ordered that need to be deligated and make sure that all [redacted] SG's was fully deligated before giving new medication to the clients.
54(c)(2)	Requested MD's progress notes to get the accurate weight for the client #7 and service plan has been updated to 02/25/2022	7/19/2022	I will make sure to weight client every month or as needed or whatever MD's ordered and always double check if clients get doctor's appointments too. I will make sure to follow whatever MD's ordered in weighting the clients and put phone reminders on client's folder so I dont forget in the future. I will make sure

All items that were corrected are attached to this POC

PCG's Signature: Joy Jane Agcailli

Date: 8/10/22

CTA has reviewed all corrected items

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)

Chapter 11-800

PCG's Name on CCFFH Certificate: Joy Jane Agcaoli

(PLEASE PRINT)

CCFFH Address: 91014 Kuhina 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?
54(c)(5)	Medication Label has been corrected and matched to MAR and MD's ordered.	7/29/2022	To make reminders on whatever is almost due for all service plan and get updated monthly too. I will make sure to always checked MD's ordered was matches with the medication bottle all the time. Right after clients appointment always checked MD's notes and checked new orders, notify RNCP and fax paperworks to the office. Always double checked new medication bottle that just delivered if matches with the MD's ordered if not, call pharmacy right away and clarify with the medication.

All items that were corrected are attached to this POC

PCG's Signature: Joy Jane Agcaoli

Date: 8/10/22

CTA has reviewed all corrected items

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

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

PCG's Name on CCFFH Certificate: Joy Jane Agcaoili

(PLEASE PRINT)

CCFFH Address: 91-1076 Kuhina 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?
54(c)(1)	Expenditure records for client # 1 and # 2 has been filed.	8/4/2022	In the future, I will make sure to always checked and do the monthly expenditure for all clients. I will make reminders and do monthly routine of checking all expenditures so I dont get behind with their monthly budget and expenses.
54(c)(8)	Personal inventory for client # 2 has been done and filed.	8/4/22	I will make sure to do inventory list for all clients right after the admission day. I will make sure to checked and make a list for all their belongings before fixing in their cabinets and get checked monthly and clients/POA/ family member was inform whatever they have and let them signed the inventory list from all the time.

All items that were corrected are attached to this POC

PCG's Signature: Joy Jane Agcaoili

Date: 8/10/22

CTA has reviewed all corrected items