Foster Family Home - Deficiency Report

Provider ID: 1-568032

Home Name: Wilson Verdadero, CNA Review ID: 1-568032-13

576 Ulumalu Street Reviewer: Jackie Chamberlain

Kailua HI 96734 Begin Date: 7/24/2022

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 annual inspection.

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

Foster Family I	Home Records	[11-800-54]	
54.(c)(2)	Client's current individual service plan, an	nd when appropriate, a transportation plan approved by	y the department;
54.(c)(5)	Medication schedule checklist;		
Comment:			

54.(c)(2) Service plan for client #1 is outdated by 1 month

54.(c)(5) Medication discrepancy for client # 3 medication prescription label did not match medication administration record and / or the signed MD orders for and

Compliance Manager

Primary Care Giver

Date __

Date

7/25/2022 1:43:47 PM

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

PCG's Name on CCFFH Certificate: Wilson Verdadero

(PLEASE PRINT)

CCFFH Address:

576 Ulumalu Street Kailua, HI 96734

(PLEASE PRINT)

Rufe 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.2	Recieved service plan for client #1 from her CMA. It was placed into "service plan" tab.	7/26/22	The foster home will create a check list and put all due dates on a wall calendar to avoid laspse in the future. I will contact the CMA if there is a missing document. The CMA will send the required documents to caregiver as soon as it is completed.
54.c.5	Medication discrepancy was corrected by client's MD, pharmacy, CMA and caregiver on the client's medication administration record.	7/27/22	The caregiver will check the doctors order to make sure it match with the MAR and medication bottle everytime before giving a medication. If there is a discrepancy, the caregiver will ask help with the CMA/visiting nurse. If the doctors order or MAR does not match with the medication bottle we will immediately contact the MD, pharmacy and CMA to correct the problem.

Ø	All items that	t were correct	ed are attached to t	his POC		
PCG's	Signature:	Wilson	Verdodew		Date:	07/29/22