

Foster Family Home - Deficiency Report

Provider ID: 1-120065

Home Name: Estela Aganos, NA

Review ID: 1-120065-12

94-414 Kuahui Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 7/15/2022

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 8/15/22.

Foster Family Home Background Checks [11-800-8]

8.(d)(2)(A) A caregiver, substitute caregiver, or other adult residing in the community care foster family home, except for adults receiving care, has been convicted of a crime other than a minor traffic violation involving a fine of \$50 or less;

Comment:

8.(a) (1), (d) (2) (A)- C [redacted] s Ecrim date [redacted] with a positive finding. C [redacted] to obtain a new set of APS/CAN/Fingerprint to determine if an exemption request will be initiated.

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b) (8)- CG#2, CG#3, and CG#5's First Aid certification lapsed on [redacted] and no current certification present in the CCFFH binder.

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:

Comment:

50.(a)- CG#2, CG#3, CG#4, and CG#5 were without evidence of having been trained with the CCFFH's Emergency Preparedness Plan.

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)- Client [redacted] with a [redacted] device located inside the bedroom and no written authorization from POA/Client in client's chart.

Maribel Nakamine, Rev 7/15/22

Compliance Manager Date
[Signature] 7/15/22

Primary Care Giver Date