

Foster Family Home - Deficiency Report

Provider ID: 1-562109

Home Name: Gina Domingo, CNA

Review ID: 1-562109-12

94-1027 Paiwa Place

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 8/31/2022

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 annual inspection conducted.

Deficiency Report issued during CCFFH inspection with a written plan of correction due to CTA on 9/30/22.

3 Person Fire Safety, Natural Disaster 3 Person Fire Safety (3P) Fire

(3P)(b)(1) Fire shall be conducted monthly

(3P)(b)(6) Fire shall include all SCGs at least once per year

Comment:

(3P) (b)(1), (b)(6) Fire- No monthly fire drill completed for the month of July 2022. CG#3 did not conduct a monthly fire drill for the past 12 months.

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

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

Comment:

49.(a)(4)- Emergency exit pathways located in rear end and sides of the CCFFH were obstructed with multiple household items, wheelchair, etc. preventing a wheelchair to pass through safely in the event of an emergency and or evacuation.

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 without a doorknob present; clients unable to lock door for privacy.

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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)(5) Medication schedule checklist;

Comment:

54.(c)(2)- Client #2's Service plan stated for client to have a call button/monitoring device for use; there was no call system present in client's room. Client #3's Service Plan did not address 2 of client's current medical diagnoses.

54.(c)(5)- Medication discrepancies noted for Client #1, Client #2, and Client #3.

Client #1- Evening medications for 8/30/22 and morning 8/31/22 were missing signatures/initials.

Client #2- Evening medications for 8/30/22 and morning 8/31/22 were missing signatures/initials.

Client #3- An as needed lifesaving medication was not available. Evening medications for 8/30/22 and morning 8/31/22 were missing signatures/initials.

Marilyn Nakaric, R 8/31/22
Compliance Manager Date

Em Dwyer 8/31/22
Primary Care Giver Date

CTA RN Compliance Manager: Maribel Nakamine

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

PCG's Name on CCFFH Certificate: Gina Domingo
(PLEASE PRINT)

CCFFH Address: 94-1027 Paiwa Place, Waipahu, HI 96797
(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?
(3)(b)(1), (b)(6)	Lapsed cannot be corrected. However, CG#3 conducted August 2022 fire drill.	08/31/22	CG#1 will utilize a spreadsheet to schedule monthly fire drills and caregivers' rotation to prevent lapses.
49.(a)(4)	Removed all household items blocking the emergency exit pathways located in rear end and sides of the house. See attached picture.	08/31/22	Never place or store any equipment, materials, or other obstructions in front of an exit door, nor within any aisle or other pathways designated for escape during an emergency.
53.(b)(9)	Installed doorknob on client's bathroom. See attached picture of the bathroom doorknob.	08/31/22	All caregivers will adhere to My Choice My Way regarding privacy of clients.
54.(c)(2)	Client #2 is given a call bell button on her bedside and Client #3 has call bell button on bedroom wall. See attached Service Plan obtained from RN Case Manager for Client #3.	08/31/22	CG1 to check and review Service Plan monthly and update CGs for any changes.
54.(c)(5)	All CGs are advised to sign medication log sheets when medications are given to client #1, client #2, and client #3. Called MD as needed medication for client #3 was ordered and pickup. See attached.	08/31/22	A daily reminder to CG's to make sure medication log sheets are sign. All as needed medications should always be available in the homes.

All items that were corrected are attached to this POC

PCG's Signature: Gina Domingo

Date: 10/03/22

CTA has reviewed all corrected items