

Foster Family Home - Deficiency Report

Provider ID: 1-200055

Home Name: Judith A. Gabur, NA

Review ID: 1-200055-5

94-341 Kahuahele Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 9/23/2022

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 10/23/22.

Foster Family Home Fire Safety [11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(a), (b)(2)- No nighttime fire drill completed for the past 12 months. CG#2 and CG#4 without evidence of having conducted a monthly fire drill for the past 12 months.

Foster Family Home Records [11-800-54]

54.(b) The home shall maintain separate notebooks for each client in a manner that ensures legibility, order, and timely signing and dating of each entry in black ink. Each client notebook shall be a permanent record and shall be kept in detail to:

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;

54.(c)(8) Personal inventory.

Comment:

54.(b)- No signatures present after each dated entry from 6/25/22-9/20/22's progress notes charting/documentation in Client #1's chart.

54.(c)(2)- Client #2's Service Plan lapsed on 7/8/22.

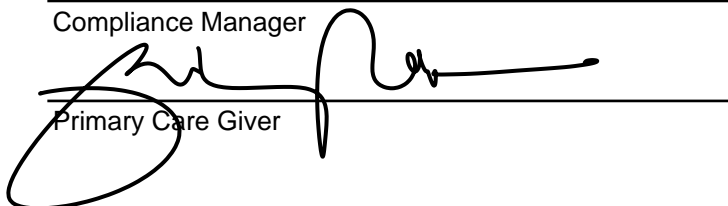
54.(c)(5)- Medication discrepancies noted for Client #1 and Client #2.

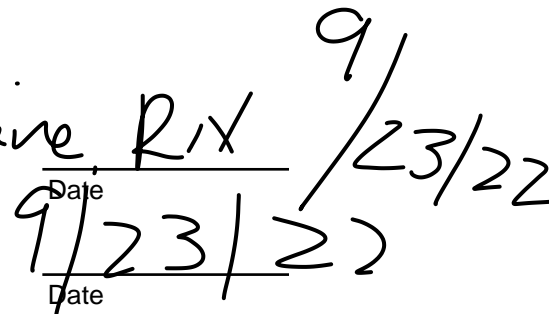
Client #1- one daily scheduled medication was not written in the client's Medication Administration Record(MAR).

Client #2- MAR was last signed on 9/21/22.

54.(c)(8)- Client #1's Personal Inventory checklist form was not completed.


Compliance Manager


Primary Care Giver


Date
9/23/22
Date