## Foster Family Home - Deficiency Report

Provider ID: 1-140010

Home Name: Lorena Kawamoto, CNA Review ID: 1-140010-13

94-472 Alapine Street Reviewer: Po Lim

Waipahu HI 96797 Begin Date: 10/14/2022

Foster Family Home Required Certificate [11	11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1. Unannounced inspection made for a 2-bed recertification. Corrective action report issued during inspection with Plan of Correction due to CTA on 11/14/2022. (30 days from the date the CCFFH is given their deficiency report).

Foster Family H	lome	Background Checks	[11-800-8]	
8.(a)(1)	Be subjec	et to criminal history record checks i	n accordance with section 846-2.7, HRS;	
8.(a)(2)	Be subjec	et to adult protective service perpetr	ator checks if the individual has direct contact with	th a client; and
Comment:				

8.a.1 CG#1 and CG#2 have lapse on ECRIM; CG#1 ECRIM expired on 2/1/2022 and renewed on 2/21/2022. CG#2 ECRIM expired 1/9/2022 and renewed on 2/21/2022.

8.a.1 and 8.a.2 CG#3 did not meet the 2 sets of APS, CAN, Fingerprints within the 12 months period.

Foster Family H	ome Information Confidentiality	[11-800-16]
16.(b)(5)	Provide training to all employees, and for home procedures and client privacy rights.	es, other adults in the home, on their confidentiality policies and
Comment:		

16.b.5 CG#4 did not receive confidentiality training and missing the signed confidentiality form.

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Foster Family	y Home	Personnel and Staffing	[11-800-41]	
41.(b)(7)	Have a c	current tuberculosis clearance that mee	ets department guidelines; and	
41.(b)(8)		cumentation of current training in bloodation, and basic first aid.	d borne pathogen and infection control, cardiopulmonary	
41.(c)	training a	annually which shall be approved by the	s, and the substitute caregiver shall attend eight hours, of in-ser ne department as pertinent to the management and care of clien tation of training received by all caregivers, in the caregiver file i	ıts.
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## Comment:

41.b.7 CG#1 TB expired on 1/29/202, no new present for both.

41.b.8. CG#1 CPR, AED, First aid expired 9/25/2021, no new present. CG#3 First Aid expired on 8/31/2020, no present.

41.c. CG# 2 is missing 4 hours credits, CG#3 is missing 3.5 hours credits, CG#4 is missing 6 hours credits.

Foster Famil	y Home	Fire Safety	[11-800-46]
46.(a)	of the d		nd maintain a record, in the home, of unannounced fire drills at different times lls shall be conducted at least monthly under varied conditions and shall
46.(b)(2)	All care	givers have been trained to imp	plement appropriate emergency procedures in the event of a fire.
Comment:			

## Comment

46.a. And 46.b.2 No fire drill were conducted since 5/23/2021.

Foster Famil	y Home Records	[11-800-54]	
54.(c)(5)	Medication schedule checklist;		
Commont			

Comment:

54.c.5 Client #1 and #2 MARs were last sign out on 10/11/2022, and nothing after. Client #2 daily workflow was last sign out on 10/11/2022 and nothing after.

Compliance Manager

Primary Care Giver

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