

Foster Family Home - Deficiency Report

Provider ID: 1-512401

Home Name: Margie Agliam, CNA

Review ID: 1-512401-12

94-1496 Kahualoa Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 3/1/2023

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 visit made for a 2-bed annual inspection.

Deficiency Report issued during CCFFH inspection with Plan of Correction due to CTA within 30 days of inspection (issued on 3/1/23).

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

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- HHM #4 without the result of the 2nd set of APS/CAN/Fingerprinting.

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.

Comment:

46.(a)- Last fire drill present in record was documented on 1/20/23. No fire drill documentation present for February 2023.

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 #1's bedroom doorknob lock was on the outside. Clients' bedrooms are supposed to allow clients to lock them from the inside for privacy.

Foster Family Home Records [11-800-54]

54.(c)(5) Medication schedule checklist;

Comment:

54.(c)(5)- Client #1's Medication Administration record was last signed on 2/28/23. Client's morning medications for today (3/1/23) were not signed.

Maribel Nakamine, R 3/1/23
Compliance Manager Date
M. Agliam 3/1/23
Primary Care Giver Date

