Foster Family Home - Deficiency Report

Provider ID: 1-516221

Home Name: Mila Burcena, CNA Review ID: 1-516221-12

94-1120 Kahuamo Street Reviewer: Jackie Chamberlain

Waipahu HI 96797 Begin Date: 3/20/2023

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

Comment:

6(d)(1) CCFFH inspection made for a 3 bed re-certification.

Deficiency Report issued during CCFFH inspection with plan of correction required, due to CTA within 30 days of inspection.

Foster Family	y Home Personnel and Staffing	[11-800-41]
41.(f)(1)	Tuberculosis clearances that meet department	of health guidelines; and
41.(f)(2)	Background checks	
41.(j)(3)		rance by case management agency and department staff, with or onitoring, investigation, and quality assurance review.
Comment:		

41.(f)(1) HHM 4 has no TB clearance

41.(f)(2) HHM 4 has no background checks

41.(j)3 CTA was present 10 minutes before entrance to the home was possible due to locked gate and no answer to doorbell from CG 2 was G at the time of arrival for inspection. There is only a cow bell on the locked gate requiring CTA to attempt call into CCFFH by phone and voice to gain access

Foster Family	Home Physical Environment	[11-800-49]
49.(a)(2)	Grab bars in bath and toilet rooms used I	by the client, as appropriate;
Comment:		

49.(a)(2) Toilet within proximity of client 1 does not have grab bar at toilet

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3 Person Physical Environment		3 Person Physical Environment		(3P) Env.	
LIMITOTITIE					
(3P)(a)(3) Env.	the room	must be at least 140 square	eet		
(3P)(a)(4) Env.	the room	must have at least three (3) f	eet between the beds		
(3P)(a)(5) Env.	the room must have space for a dresser and nightstand for each client				
(3P)(a)(6) Env.	the room must allow space for clients and wheelchairs to move easily				
Comment:					
(3P)(a)(3) Env. The 2 client shared room measures less than 140 square feet (3P)(a)(4) Env. The 2 client shared room has less than 3 feet between beds (3P)(a)(5) The 2 client shared room does not have dresser and nightstand for each client (3P)(a)(6) Env.There is minimal room to maneuver wheel chairs in the 2 client room					
Foster Family H	ome	Client Rights		[11-800-53]	

oster Family Home Client Rights [11-800-53]

Have the client's personal and medical records kept confidential; 53.(b)(8)

Comment:

53.(b)(8) No documentation that HHM 4 has been trained in confidentiality

Foster Famil	y Home	Records		[11-800-54]	
54.(c)(3)	Current cop	pies of the client's physi	ician's orders;		
Comment:					

54.(c)(3) Client # 1 has a MD order from 1/23 for PT evaluation, notification of a 2nd BP reading same day as office visit (due to being high) and for daily pulse rates to be send to cardiologist. There is no documentation that any of these has occurred

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