

Foster Family Home - Deficiency Report

Provider ID: 1-180012

Home Name: Nerissa Dela Cruz, CNA

Review ID: 1-180012-10

94-403 Kipou Street

Reviewer: Jackie Chamberlain

Waipahu

HI

96797

Begin Date: 11/10/2022

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) 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 Home Background Checks [11-800-8]

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

Comment:

8.(a)(1) HHM 3 and 4 have not completed fingerprint, APS or CAN

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5) No proof of provide training HHM 3 or 4 on their confidentiality policies and procedures and client privacy rights.

Foster Family Home Records [11-800-54]

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



54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(c)(5) Client # 1 has no documentation on the MAR since 11/03/22

54.(c)(5) Medication discrepancy for client # 1 medication prescription label did not match medication administration record and / or the signed MD orders.

54.(c)(6) no daily documentation since 8/2022 for client 1


Compliance Manager

Primary Care Giver

11/10/22
Date
11/10/22
Date

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

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

PCG's Name on CCFFH Certificate: NERISSA DELA CRUZ

(PLEASE PRINT)

CCFFH Address: 94-403 KIPOU STREET 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?
8. (a)(1)	Fingerprint APS/CAN was obtained for newly added HHM3 and HHM4. It was placed to home binder.	11/22/22	Home will use schedule calendar on Iphone and be reminded to complete paperworks on time.
16.(b)(5)	CG provided training for the newly added HHM3 and HHM4 for confidentiality, policies, procedure and client privacy rights. It was placed into home binder.	11/11/22	Home understands the importance and make sure to provide trainings for confidentiality, policies, procedure, and client privacy immediately to a Household Member/s added to the home.
54.(c)(5)	CG documentation of MAR since 11/03/22 was done. It was placed back to client binder.	12/07/22	Home understand and will make sure medication that was given should be documented immediately and not to separate recordings and will be shown to compliance manager during visits. Home will post a note reminder.
54.(c)(5)	CG contacted RN Case Manager to correct the medication discrepancies in Medication Administration Record of client. It was placed back to client binder.	11/16/22	Home understand and will check all of medication orders, bottles and MARs to ensure all the matches before giving medication .If anything , CG will contact RNCM , MD and on Pharmacy.
54.(c)(6)	CG daily documentation since 8/22 was done. It was placed back to client binder.	12/07/22	Home understand and will make sure all daily documentation is recorded promptly on client binder and not to seraparate recordings. Home will post a note reminder.

☒ All items that were corrected are attached to this POC

PCG's Signature: 

Date: 12/07/22

☒ CTA has reviewed all corrected items