## Foster Family Home - Deficiency Report

Provider ID: 1-200067

Home Name: Trelita Sacayanan, CNA Review ID: 1-200067-5

91-1222 Hanaloa Street Reviewer: Jackie Chamberlain

Ewa Beach HI 96706 Begin Date: 10/25/2022

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 2 bed re-certification.

CCFFH requests increase to 3 bed CCFFH once 3 bed application and at least 1 CG has qualified for 3 bed

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

Foster Family Home Physical Environment [11-800-49]

49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(c)(3) Indoor and outdoor living spaces are cluttered in manner infringing on clients use of space and are cluttered in an unsafe manner including emergency exit blocked with objects

Foster Family Home Records [11-800-54]

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

54.(c)(2) Service plan for clients #1 have discrepancies between the written service plan, the MD order, and the actual CCFFH practice

Compliance Manager

Primary Care Giver

Date / / /

Date

10/25/2022 3:42:51 PM

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## JACKIE CHAMBERLAIN, RN

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

PCG's Name on CCFFH Certificate: TRELITA SACAYANAN

(PLEASE PRINT)

**CCFFH Address:** 

91-1222 HANALOA ST, EWA BEACH, HI 96706

(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?
49(c)(3)	House cleaned, well ventilation, adequately lighted and safety for clients.	10/25/22	I will keep my home clean, place a fan as close as possible to an open window blowing outside, point fans away from people. I will keep windows clean and unobstructed from furnitures for the safety of my clients.
49(c)(3)	Indoor and outdoor are uncluttered, emergency exit are cleared in any objects.	10/25/22	I will keep emergency exit free from clutter. I will schedule a monthly cleaning on my calendar.
54(c)(2)	Make management with alternative driver (please see attached application for approval).	10/25/22	Home will keep alternative transportation plan form in CG1 binder form reference.
54(c)(2)	Service Plan for client #1 was corrected between order and actual CCFFH practice.	10/25/22	In the future, i will follow MD order to have the side rails up while the client is in the bed for safety I will schedule a monthly review on my calendar.

All items that were corrected are attached to this POC

PCG's Signature:

Date: 12-5-22

X CTA has reviewed all corrected items