

Foster Family Home - Deficiency Report

Provider ID: 1-100064

Home Name: Connie Banda, NA

Review ID: 1-100064-13

94-589 Kaiewa Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 3/24/2023

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 re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 3/24/2023 with Plan of Correction due to CTA within 30 days of inspection date of 3/24/2023.

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

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

Comment:

8(a)(2) APS/CAN checks were lapsed for CG# 2, #3, #4 and HHM# 1,#2,#3. APS/CAN was due on or before 5/28/2022 and was completed on 06/23/2022.

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 that training on confidentiality policies and procedures and client privacy rights was provided to HHM# 4.

Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(7) CCFFH did not have evidence of current TB clearance for CG# 2 (HHM# 1). CG# 2 (HHM#1) TB clearance was due on/before 9/24/2022. No new TB present.

41.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG#1, #2, #3, and #4. CG#1, #2, #3, and #4 CPR/1st aid expires 3/14/2023, and no new present.

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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.

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(a) - Last fire drill present in record was documented on 2/16/2023. No fire drill documentation present for March 2022 through December 2022.

46.(b)(2)- CG# 2 and #3 did not have evidence of conducting a monthly fire drill within the past 12 months.

Foster Family Home

Records

[11-800-54]

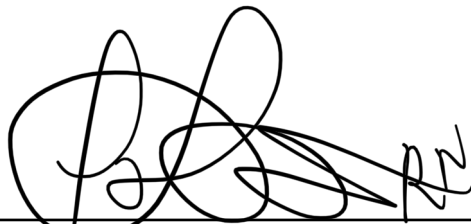
54.(c)(5) Medication schedule checklist;

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;

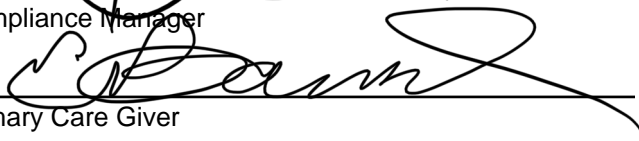
Comment:

54(c)(5) No MAR initials present for Client#1, last entry was 3/8/2023.

54(c)(6) Flowsheet was not documented daily, last entry was 3/6/2023.



Compliance Manager



Primary Care Giver

3/23/23

Date

3/23/23

Date