

Foster Family Home - Deficiency Report

Provider ID: 1-517477

Home Name: Corazon Sales, LPN

Review ID: 1-517477-18

94-1097 Lumiaina Street

Reviewer: Angel England

Waipahu HI 96797

Begin Date: 12/6/2022

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

Comment:

6.d.1 Recertification inspection completed. Deficiency Report issued via email on 12/22/22. Written plan of correction due to CTA by 1/22/2023.

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(h) The primary caregiver shall ensure that all substitute caregivers are approved by the department prior to providing services and shall provide a verbal and written report of all substitute caregiver changes, including additions, terminations and replacements, to the department.

Comment:

41.h CCFFH was using an unapproved caregiver to assist with transfers, turning and positioning and personal care.

Foster Family Home	Client Care and Services	[11-800-43]
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43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.c.3 No RN delegation signature on delegation forms for CG#2 and CG#3 for client #2.

Foster Family Home - Deficiency Report

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 Lack of cleanliness noted throughout the home. Odors of human and animal urine and feces noted although has been decreased per [REDACTED] from previous visits.

CCFFH has previously been cited for uncleanness and strong urine odors: complaint 10/11/17, complaint 12/12/19, re-certification inspection 1/17/20, complaint 4/1/20, re-certification inspection 12/26/20 and re-certification inspection 12/20/21, complaint 2/9/22.

Client #1 bedroom had dried feces and urine stains on walls and floor. Floor also had dirt and debris on it. Unable to determine if areas could be easily cleaned as client #1 refused to allow [REDACTED] to take a wipe and wipe the areas down. The smell in this room was significant due to client throwing his feces and urine around the room. [REDACTED] has previously been to this home and stated the odor was decreased from previous visits. Door and light switches were dirty.

Client #2 bedroom floor had dirt and debris on it. Walls have old stains on them. The smell in this room was moderate although the cause was not evident. Door and light switches were dirty.

Client #3 bedroom had little to no odor. The floor did have dirt and debris on it. Items that the client does not own or that are not their own supplies were being stored in this room. Mirror and sink were dirty that are in the room. Door and light switches were dirty.

Client bathroom had little to no odor. There are some old stains in the bathroom on the walls and door. However, there are areas that can be cleaned that were dirty. The commode had built up urine and dried feces on the top and bottom of the seat and inside the commode. The floor had dirt and grime on it. The sink was dirty with hair around the basin. Door and light switches were dirty.

Downstairs Kitchen – Kitchen table had stickiness and was covered in fingerprints. It appeared the table had not been cleaned in at least a few days. There was a small compact refrigerator in the kitchen. There was dried, spilled food throughout the appliance in the refrigerator portion.

Garage-unable to inspect the garage. When CG#1 opened the door leading to the garage the smell was so overwhelming no one could go in there. There is a refrigerator out in the garage that according to CG#1 has food used for clients in it. [REDACTED] was unable to inspect this refrigerator. There were multiple stacks of boxes stacked up high in the garage almost to the ceiling. There is very little floor space. CG#1 states diapers, wipes, other supplies, and canned foods were in the boxes. CG#1 states there were dogs caged in the garage and that is where the smell comes from. I explained that the garage needs to be properly ventilated, and the odor is unacceptable. [REDACTED] must be able to inspect the garage.

Upstairs Kitchen (food preparation areas) – top of stove, oven and refrigerator had old food and spills on them. These appliances were dirty.

Floors – nearly all the floors in each room had debris and dirt on them with some built up dirt and grime. It appeared they had not been swept or mopped in several days.

Doors and light switches – nearly all the doors and light switches, particularly in the client rooms and client bathroom had built up dirt, grime and fingerprints on them. A couple were also sticky to the touch.

It was noted that the walls are not painted with washable paint and tend to stain easily.

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Client Rights

[11-800-53]

53.(b)(13)

Retain and use personal clothing and possessions as space permits, unless to do so would infringe upon the rights of other clients;

Comment:

53.b.13 Client #2 Bedroom had a bedframe that did not belong to the client being stored in the room. Client rooms are meant for client's only. Items not belonging to the client cannot be stored in their rooms.

Foster Family Home

Records

[11-800-54]

54.(c)

The content of each client notebook shall be consistent with standards established by the department and shall contain:

54.(c)(2)

Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

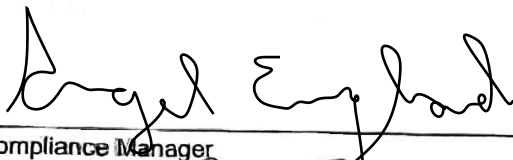
54.(c)(6)

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;

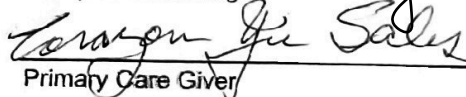
Comment:

54.c.2 Client #2 service plan stated next review date was 12/17/19. No current service plan present. Client #3 service plan last dated 12/29/21 stated next review date was 6/2022. No current service plan present.

54.c.6 Daily documentation not being completed. Client #2 ADL flow sheet was not completed since 12/1/22. Vital sign flow sheet - there was none present for December, last v/s documented on 11/28/22. Client #3 had tube feedings. Record for tube feeding was not completed on 12/4 or 12/5



Compliance Manager



Primary Care Giver

3-3-2023

Date

12-20-22

Date

CTA RN Compliance Manager: Angel England, RN

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

PCG's Name on CCFFH Certificate: Corazon Sales, LPN

(PLEASE PRINT)

CCFFH Address: 94-1097 Lumiaina 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?
6.(d)(1)	█████ has understood all requirements for the CCFFH and complied to correct all the deficiencies as cited █████	12/06/22	█████ CG has to abide by all the requirements, rules, and regulations set by CTA and the Department of Health. Since █████ CG chose to be in the caregiving business, she has to give her all for the safety and well-being of all the clients under her care.
41.(h)	█████ CG has to be aware that all █████ caregivers are approved by Department of Health. █████ CG has utilized only approved █████ caregivers in the care of the clients.	03/10/22	█████ CG always has to ensure that only approved █████ caregiver is to assist with any client's care whether transferring, turning, positioning, personal care.
43.(c)(3)	█████ CG knows the importance of following the service plan. So for client #2, the delegation for as for CG#2 and CG#3 had the RN signature as required.	08/09/22	█████ CG always has to make sure that the service plan for each client be followed and RN delegation with signature for caregivers are completed.

☒ All items that were corrected are attached to this POC

PCG's Signature: _____

Corazon Sales

Date: 01-20-2023

☒ CTA has reviewed all corrected items

CTA RN Compliance Manager: Angel England, RN

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(PLEASE PRINT)

CCFFH Address: 94-1097 Lumiaina Street Waipahu, HI 96797

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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?
41.(h)	■ CG is very much aware not to allow anybody or unapproved ■ CG to provide personal care and to help with transferring clients. This ■ CG would not sabotage her recertification by breaking the rule of not having unapproved ■ CG to do care and services to clients. The ■ inspector's assertion that this ■ CG continues to allow banned ■ CG when ■ CG never made any statement that she continues to defy all the rules and regulations. No truth in the ■ inspector's claim that ■ CG volunteered the statement, "Herbert (an unapproved ■ CG is helping with the care and services to the clients."	3/10/22	■ CG will always have ■ CG be approved ■ before any physical contract with clients. Also, RN delegation and training in accordance with all the rules and regulations for foster caregiving.

☒ All items that were corrected are attached to this POC

PCG's Signature: _____

Corazon Yee Sales

Date: 02-19-2023

☒ CTA has reviewed all corrected items

CTA RN Compliance Manager: Angel England, RN

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CCFFH Address: 94-1097 Lumiaina Street Waipahu, HI 96797

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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?
43.(c)(3)	■CG always makes it a point to have all required documents and filed them properly in a timely manner. ■CG would ask the help of CMA to do the RN delegations before allowing a ■CG to work in the home. If there's any deficiency that the ■ inspector points out, ■CG needs to correct it within days of the citation.	08/09/22	■CG needs to review all necessary documents frequently and not only during inspection time. ■CG is obligated to arrange with the CMA to do the RN delegations before allowing a ■CG to work in the home and get copies of the delegations and file them within a day or two to complete all the requirements in compliance of having a foster home.
49.(c)(3)	The whole house, including the garage, was professionally cleaned ■■■■■ ■CG was with the cleaning team the whole time, so that she could replicate and follow their methods of thorough cleaning and use of the right cleansing agents. The ■CG has continued to clean, disinfect, and deodorize the whole house daily just like how the professional cleaners did.	01/18/23	■CG has continued what she learned from the professionals on how to thoroughly clean, disinfect, and deodorize the whole house and garage. The cleaning agency will always be utilized again for more thorough cleaning as needed.

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PCG's Signature: Corazon Sales

Date: 02-19-2023

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CCFFH Address: 94-1097 Lumiaina Street Waipahu, HI 96797

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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?
43.(c)(3)	RN delegation from CMA was obtained by █CG.	08/09/22	█CG has to make sure that RN delegation from CMA are obtained and updated within 1 week so that the service plans are implemented properly.
54.(c)(2)	█CG contacted the CMA and all copies of service plans were obtained and filed.	12/06/22	█CG is aware of the importance of working cooperatively with the CMA so that the clients get the best care in accordance with all the rules and regulations governing this foster home. █CG has to be more proactive in trying to obtain updated service plans when needed within a reasonable amount of time, like within 1 week. █CG always has to remember to have an accurate record of everything being done while providing care to clients. File records promptly and accurately.

☒ All items that were corrected are attached to this POC

PCG's Signature: Corazon Sales

Date: 02-22-2023

☒ CTA has reviewed all corrected items

CTA RN Compliance Manager: Angel England, RN

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CCFFH Address: 94-1097 Lumiaina Street Waipahu, HI 96797

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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)	To meet all the requirement of keeping the home clean, well ventilated, adequately lighted, and safe, ■CG did the following: 1) A professional cleaning service was hired to do thorough cleaning and disinfecting the whole house. 2) The walls and doors were repainted clean. 3) A new and bigger refrigerator is provided just for clients' use. And for food and refrigeration for clients are now all done in the downstairs kitchen. This way, the clients' foods and meal preparation are separated from caregivers. 4) Diaper boxes and non-perishable items were reduced from the garage and more ventilated.	01/18/23	While ■CG is always keeping the clients and the whole house neat and clean, she has a professional cleaning service come and do a more thorough cleaning, disinfecting, and deodorizing in all the clients' areas, meaning the downstairs part of the house. The ■CG has separated food preparation and refrigeration the downstairs for clients only, the upstairs for ■CG and household.

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PCG's Signature: Corazon Ju Sales

Date: 01-20-2023

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CCFFH Address: 94-1097 Lumiaina Street Waipahu, HI 96797

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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?
53.(b)(13)	■CG recognizes the rights of clients to retain and use personal clothing and possessions. No items or things that don't belong to the client are stored in his room or closet.	12/07/22	■CG has ensured that client retain and use personal clothing and everything in his room is for client only. Never store anything in room if it does not belong to specific client.
54.(c)(2) 54.(c)(6)	The service plans for client #2 and client 3 are updated. ■CG has to make sure to record and document the enforcement of the individual service plans and ADLs on a daily basis. The ADL flowsheet, including vital signs, for client #2 was completed and documented. And for client #3, tube feedings are updated. So as not to miss recording, all treatments, medications, and tube feedings are to be recorded immediately after providing them to clients.	12/06/22	Since ■CG went into the caregiving business in the early 1980s, she's always made it a priority to do a good job. At the same time, ■CG has to accurately and promptly record and document everything that's provided and done because when no documentation, it's never done. So, ■CG has to always document right after the deed, so nothing's forgotten.

☒ All items that were corrected are attached to this POC

PCG's Signature: Corazon Ju Sales

Date: 01-20-2023

☒ CTA has reviewed all corrected items

CTA RN Compliance Manager: Angel England, RN

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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?
53.(b)(13)	All things that did not belong to the client were removed from his room. Everything that 's inside of his room is his own. All things that did not belong to the client were removed from his room. Everything that's inside of his room is his own.	12/07/22	Always keep each client's belongings separate from anybody's. Only his things are always in his room.
54.(c)(2)	Service plans are updated and filed with assistance from CMA, in compliance with the rules and regulations of having a foster home. Copies of the service plans are provided to [REDACTED] inspector as requested.	12/06/22	[REDACTED] CG needs to update service plans as needed and to give copies to [REDACTED] inspector.

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PCG's Signature: Corazon Sales

Date: 02-19-2023

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