

# Foster Family Home - Deficiency Report

**Provider ID:** 1-220062

**Home Name:** Heribert Basilio, CNA

**Review ID:** 1-220062-3

48 Dole Road

Reviewer: Maribel Nakamine

Wahiawa

HI

96786

Begin Date: 5/2/2023

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- Unannounced visit made for a 2-bed recertification inspection.

Deficiency Report issued to CCFFH during inspection with Plan of Correction due to CTA within 30 days of inspection (issued on 5/2/23).

Foster Family Home	Information Confidentiality	[11-800-16]
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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)- CG#4 without evidence of having been trained with the CCFFH's confidentiality policies and procedures and client privacy rights training.

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

41.(g) The primary and substitute caregivers shall be assessed by the department for competency in basic caregiver skills and specific skill areas needed to perform tasks necessary to carrying out each client's service plan. The documentation of training and skill competency of all caregivers shall be kept in the client's, case manager's, and caregiver's current records with the current service plan.

Comment:

41.(b)(7)- CG#2's TB clearance without a signature of an MD, APRN, or PA. CG#4's TB clearance- unable to determine the title of signature-? MD, APRN, or PA.

41.(b)(8)- CG#4 without documentation of a current basic first aid.

41.(g)- No basic skills checklist completed for CG#4 in Client #1's record/chart.

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 delegations present for CG#4 in Client #1's record/chart.

# Foster Family Home - Deficiency Report

## 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.

Comment:

46.(a)- No evening and nighttime monthly fire drill conducted.

## Foster Family Home

## Physical Environment

[11-800-49]

49.(a)(1) Bathrooms with non-slip surfaces in the tubs and or showers, and toilets adjacent or easily accessible to sleeping rooms;

49.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;

Comment:

49.(a)(1), (2)- No non-slip surface present on clients' shower floor. No grab bars near client's toilet.

## Foster Family Home

## Quality Assurance

[11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a)- CG#2, CG#3, and CG#4 without evidence of having been trained with the CCFFH's Emergency Preparedness Plan.

## Foster Family Home

## Records

[11-800-54]

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

Comment:

54.(c)(5)- Client #1's Medication Administration Record (MAR) was last signed on 4/20/23 and no MAR initiated for May 2023. There was one medication's label that did not match the MD's order and the MAR.

Maribel Nakamie, RN  
Compliance Manager  
SGF  
Primary Care Giver

5/2/23  
Date  
5/2/23  
Date