

Foster Family Home - Deficiency Report

Provider ID: 1-512162

Home Name: Erlinda Agcaoili, CNA

Review ID: 1-512162-14

91-862 Makule Road, B-1

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 5/19/2023

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 5/19/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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

8.(c) The department shall make a name inquiry into the criminal history records for the first two years a case management agency is licensed or a home is certified and annually or biennially thereafter depending on the licensure status of the case management agency or certification status of the home.

Comment:

8(c) State Name Check (eCrim) was overdue for CG#2. State Name Check (eCrim) was due on or before 6/15/2022 and is not present in the CCFFH file.

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 CG#3.

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

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

Comment:

41.(b)(7) CCFFH did not have evidence of current TB clearance for CG# 3. CG#3 TB clearance was due on/before 7/26/2022 and no new in the file.

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Fire Safety

[11-800-46]

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

Comment:

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

Foster Family Home

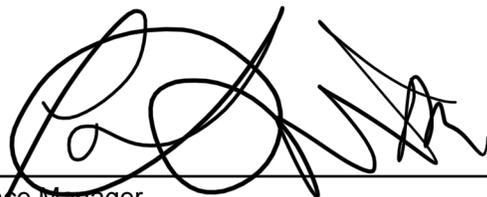
Quality Assurance

[11-800-50]

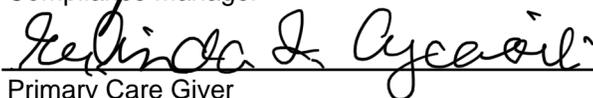
50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a) - The CCFFH did not have evidence that a documented internal emergency management policy and procedure was in place. CG#3 did not receive the training and did not sign for the policy.



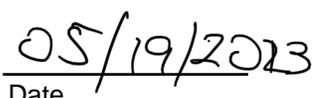
Compliance Manager



Primary Care Giver



Date



Date