Foster Family Home - Deficiency Report						
Provider ID:	1-090116					
Home Name:	Amelia Qu	iitazol, NA	Review ID:	1-090116-3		
94-1010 Hohola	Street		Reviewer:	Jackie Chamberlain		
Waipahu		HI 96797	Begin Date:	6/26/2023		
Foster Family	Home	Required Certi	ficate	[11-800-6]		
6.(d)(1)	Comply	with all applicable re	quirements in this ch	apter; and		
Comment:						
6(d)(1) CCFFH inspection made for a 2 bed recertification inspection.						
Deficiency Re inspection	port issued o	during CCFFH ins	pection with plan of	f correction required, due to CTA within 30 days of		
Foster Family	Home	Information Co	onfidentiality	[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.						
16.(b)(5) CG 2	and HHM ²	I and 2 have no pr	oof of confidentiali	ty training		
Foster Family	Home	Personnel and	Staffing	[11-800-41]		
41.(b)(7) Comment:	Have a c	current tuberculosis o	clearance that meets	department guidelines; and		
41.(b)(7) CG 2	2 TB clearan	ce is not up to dat	9			
Foster Family	Home	Quality Assura	nce	[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) internal emergency management policies has not been signed by CG 2 $\,$

Foster Family Home - Deficiency Report

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;				
54.(c)(5)	Medication schedule checklist;				
54.(c)(8)	Personal inventory.				
Comment:					

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

54.(c)(5) Medication discrepancy for client # 1 medication prescription label did not match medication administration record and / or the signed MD orders

54.(c)(8) Client # 1 Personal inventory sheet is blank

Primary Care Giver