## Foster Family Home - Deficiency Report

Provider ID: 1-180047

Home Name: Kris Marie Domingo, RN Review ID: 1-180047-11

94-1157 Awaiki Place Reviewer: Maribel Nakamine

Waipahu HI 96797 Begin Date: 8/7/2023

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 3-bed recertification inspection.

Deficiency Report issued during CCFFH inspection with Plan of Correction due to CTA within 30 days of inspection (issued on 8/7/23).

Foster Family H	lome Background Checks	[11-800-8]	
8.(a)(1)	Be subject to criminal history record checks in accordance with section 846-2.7, HRS;		
8.(a)(2)	Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and		
Comment:			

8.(a)(1), (2)- No 1st and 2nd set of APS/CAN/Fingerprint results present for CG#5.

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 confidentiality policies and procedures and client privacy rights training present for CG#5.

Foster Famil	ly Home	Personnel and Staffing	[11-800-41]	
41.(c)	The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.			
41.(i)	The prii	, , ,	nt of any dependent household members or changes in household	

Comment:

41.(c)- CG#4 without any hours of the required annual in-service hours of 12 for the current year. CG#5 was short of 5 hours of the required 12 hours of annual in-service hours for the current year.

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## 3 Person Staffing Requirements (3P) Staff

(3P)(b)(2) Staff

Allowing the primary caregiver to be absent from the CCFFH for no more than twenty-eight hours in a calendar week, not exceed five hours per day; provided that the substitute caregiver is present in the CCFFH during the primary caregiver's absence. Where the primary caregiver is absent from the CCFFH in excess of the hours, the substitute caregiver is mandated to be a Certified Nurse Aide, per 321-483(b)(4)(C)(D) HRS.

Comment:

(3P)(b)(2) Staff- CCFFH without evidence that a sign out sheet was being maintained. CG#1 was away on vacation for the month of July 2023. No sign out/in sheet completed for those dates.

3 Person Fire Safety, 3 Person Fire Safety (3P) Fire Natural Disaster

(3P)(b)(1) Fire shall be conducted monthly

(3P)(b)(6) Fire shall include all SCGs at least once per year

Comment:

(3P)(b)(1), (6) Fire- No monthly fire drill conducted/completed for the month of July 2023. CG#5 without evidence of having conducted a monthly fire drill.

## 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#5 without evidence of having been trained with the CCFFH's Emergency Preparedness Plan.

Foster Family	y Home Records	[11-800-54]
54.(c)(2)	Client's current individual service pl	an, and when appropriate, a transportation plan approved by the department;
54.(c)(5)	Medication schedule checklist;	
Comment:		

54.(c)(2)- Client #2's current Service Plan dated 1/20/23 without the POA's/Client's signature.

54.(c)(5)- Client #1, Client #2, and Client #3's Medication Administration Records were last signed on August 3, 2023. No signatures from August 4-7 (am doses) 2023.

Compliance Manager

Primary Care Giver

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