

Foster Family Home - Deficiency Report

Provider ID: 1-210077

Home Name: Mila D. Pasamonte, CNA

Review ID: 1-210077-6

1653 Ulueo Street

Reviewer: Po Lim

Kailua

HI

96734

Begin Date: 7/27/2023

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 re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 7/27/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

CCFFH is applying for an increase from 2 beds to 3 beds.

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 #2, #3, #4, and HHM# 1.

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Personnel and Staffing

[11-800-41]

- 41.(a)(2) Be a NA, an LPN, or RN;
- 41.(a)(3) Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and
- 41.(b)(5)(A) When the caregiver does not have a valid driver's license, does not have access to an insured vehicle, or both, a written alternative transportation plan shall be submitted to the department for approval;
- 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.

Comment:

41.a.2. CG #2 and CG#4 are not approved to work in a 3 client CCFFH.

41(a)(3) No job experience form present for CG #2 and CG #4.

41.b.5.a. CG#2 and CG#4 does not have pictured identification /driver license present in the file.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG #3 and CG #4. CG #3 and CG #4 requires 12 hours of in-service training, but had zero hours attended in 2022.

3 Person Staffing

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) No evidence that a 3-bed sign out sheet was in use at the CCFFH. CTA Compliance manager was unable to verify the number of hours CG (NA) worked in a day or week.

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Medication and Nutrition

[11-800-47]

- 47.(a) A licensed practical nurse or a registered nurse shall administer medications that are to be injected, unless physician orders permit a client to self-inject. The registered nurse may delegate the administration of medication as provided in chapter 16-89, section 16-89-100.

Comment:

47.a No RN delegation present for CG#3 for client # 1 and client #2.

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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. All CGs did not received the EPP training and did not sign the acknowledgement forms.

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Records

[11-800-54]

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

54(c)(2) No current signatures of client/POA of the service plan present for Client# 2.

Compliance Manager

Primary Care Giver

Date

Date