Foster Family Home - Deficiency Report

Provider ID: 1-170002

Home Name: Rowena R. Agustin, LPN Review ID: 1-170002-13

98-241 Hale Momi Place Reviewer: Po Lim

Aiea HI 96701 Begin Date: 8/4/2023

Foster Family Ho	ome Red	uired 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 8/4/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family H	ome Background Checks	[11-800-8]
8.(a)(2)	Be subject to adult protective service perpetrator checks if the	individual has direct contact with a client; and
8.(c)	The department shall make a name inquiry into the criminal his management agency is licensed or a home is certified and ann licensure status of the case management agency or certificatio	nually or biennially thereafter depending on the
0		

Comment:

8(a)(2) APS/CAN checks were lapsed for CG#1.

APS/CAN was due on or before 2/1/2023 and was completed on 3/30/2023.

8(c) State Name Check (eCrim) was overdue for CG#1 and #2 (HHM# 1). State Name Check (eCrim) was due on or before 11/3/2022 and none present in the files.

Foster Family	y Home	Information Confidentiality	[11-800-16]	
16.(b)(5)		training to all employees, and for homes, othe ures and client privacy rights.	r adults in the home, on their confid	entiality policies and
Comment:				

16.(b)(5) No proof that training on confidentiality policies and procedures and client privacy rights was provided to HHM #2 and #3.

Foster Family Home - Deficiency Report

Natural Disaste	• •	3 Person Fire Safety		(3P) Fire		
Naturai Disaste						
(3P)(b)(1) Fire shall be c		onducted monthly				
(3P)(b)(6) Fire	shall inclu	ide all SCGs at least once per year				
Comment:						

(3P)(b)(1)(6) The CCFFH did not have evidence that fire drills had been conducted monthly and each CG at least once per year. CG#5 did not conduct a fire drill in the past 12 months. CCFFH is missing July 2023 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) - The CCFFH did not have evidence that a documented internal emergency management policy and procedure was in place. CG#4 and #5 did not received EPP training.

Compliance Manager

Primary Care Giver

8/4/2 Date 4/23