

# Foster Family Home - Deficiency Report

**Provider ID:** 1-590308

**Home Name:** Jocelyn Lomboya, CNA

**Review ID:** 1-590308-15

207 Kilani Place

Reviewer: Maribel Nakamine

Wahiawa

HI 96786

Begin Date: 8/28/2023

## 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 recertification inspection.

Deficiency Report issued during CCFFH inspection with Plan of Correction due to CTA within 30 days of inspection (issued on 8/28/23).

Client #1's 1147 lapsed on 10/20/22 and no current form was present in client's chart/records.

## Foster Family Home 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

Comment:

8.(a)(2)- CG#2's APS/CAN lapsed on 8/3/23 and no current result was present.

## Foster Family Home 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)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(a)(2)- CG#1's CNA licensure expired on 12/31/21.

41.(a)(3)- No Job Experience Form completed nor letter of employer verification of experience present for CG#1.

41.(b)(8)- CG#2's CPR/First Aid certification expired on 8/20/23 and no current certificate present.

41.(b)(8)- CG#1 and CG#2's bloodborne pathogen and infection control training lapsed on 1/8/23 and no current certifications were present.

## Foster Family Home Fire Safety [11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

46.(a)- CCFFH's last monthly fire drill was on 10/1/22. None completed from 11/2022- 7/31/23.

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## Foster Family Home

## Fiscal Requirements

[11-800-52]

52.(b) The home shall maintain fiscal records, documents and other evidence that sufficiently and properly reflect all funds received, and all direct and indirect expenditures of any nature related to the home's operation.

Comment:

52.(b)- No fiscal records present for 2022 & 2023.

## Foster Family Home

## Records

[11-800-54]

54.(a)(3) A list of applicable community resources.

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)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(a)(3)- No list of community resources present in the CCFFH binder.

54.(c)(2)- Client #1's Service Plan expired on 8/11/22 and no POA/client's signature present in the 2/11/22 Service Plan.

54.(c)(5)- Medication discrepancies were noted for Client #1 and Client #2.

Client #1- one medication's label and MD's order did not match the client's Medication Administration Record(MAR). MAR was last signed on 8/25/23. There were 2 daily scheduled medications that were not written in the client's MAR. One medication was not signed since 8/1/23-8/28/23 and medication was not available during CCFFH survey.

Client #2- Client's MAR was last signed on 8/25/23.

54.(c)(6)- Client #1's Daily Care Flowsheet/ADLs was last signed on 8/25/23.

Maribel Nakamine, RN 8/28/23  
Compliance Manager Date  
Jgr SLCg 8/28/23  
Primary Care Giver Date