

Foster Family Home - Deficiency Report

Provider ID: 1-514986

Home Name: Marcelina Saoit, CNA

Review ID: 1-514986-16

94-585 Pilimai Street

Reviewer: Po Lim

Waipahu

HI 96797

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 3 bed re-certification inspection.

Client #1 is missing form 1147.

Deficiency Report issued during CCFFH inspection via email on 8/28/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home Background Checks [11-800-8]

8.(c) The department shall make a name inquiry into the criminal history records for the first two years a case management agency is licensed or a home is certified and annually or biennially thereafter depending on the licensure status of the case management agency or certification status of the home.

Comment:

8(c) State Name Check (eCrim) was overdue for CG#2. State Name Check (eCrim) was due on or before 5/9/2023 and is not present in the CCFFH file.

Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

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.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG# 2. It was due on/before 7/31/2023. CCFFH did not have evidence of current Bloodborne Pathogen/Infection control training for CG#1, #2, and #3. It was due on/before 1/19/2023.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG# 1, #2, #3 . CG#1, #2, and #3 requires 12 hours of in-service training, but had only less than 7 hours attended in 2022.

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Foster Family Home

Records

[11-800-54]

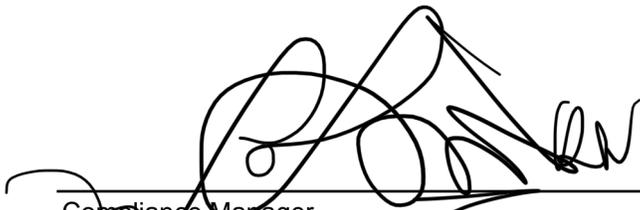
54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

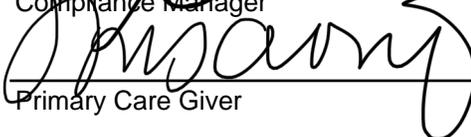
54.(c)(8) Personal inventory.

Comment:

54(c)(2) No current signatures from POA/clients for service, for Client #1 and #2.

54(c)(8) Client#1 and #2 did not have evidence that a personal inventory log has been initiated and/or maintained.



Compliance Manager


Primary Care Giver



Date


Date