

Foster Family Home - Deficiency Report

Provider ID: 1-200048

Home Name: Clarabelle A. Vallo, NA

Review ID: 1-200048-7

91-1142 Haiano Place

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 10/24/2023

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 re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 10/23/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(b)(2)- CG#2 did not have evidence of conducting a monthly fire drill within the past 12 months.

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#2 did not receive the EPP training.

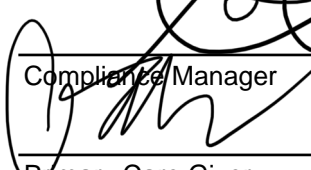
Foster Family Home Records [11-800-54]

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

Comment:

54(c)(2) No current signature of POA/client for service plan present for Client# 1.



Compliance Manager


Primary Care Giver

10/24/2023

Date
10/24/2023

Date