

Foster Family Home - Deficiency Report

Provider ID: 1-220091

Home Name: Mae Badua, CNA

Review ID: 1-220091-3

94-305 B Waialele Road

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 8/25/2023

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 8/25/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.a.1. And 8.a.2. CG#3 have not met 2 sets of the APS/CAN/Fingerprints within a 12 month period.

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

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

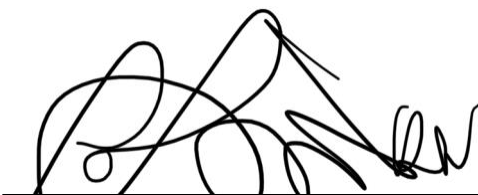
41.b.7. CG#3 have an expired TB screening on 7/8/2023. No renewal present in the file.

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 and CG#3 did not have the EPP training.



Compliance Manager



Primary Care Giver



Date



Date

CTA RN Compliance Manager: ATTN: TERRI VAN HOUTEN

**Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800**

PCG's Name on CCFFH Certificate: Mae badua

(PLEASE PRINT)

CCFFH Address: 94-305b waikele Rd Waipahu HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8(a)(1) 8(b)(2)	cg directed the cg to make an appt. Cg make an appt. To fieldprint once Result was made will put in binder For the record.	9/3/2023	Home will use the wall calender/calendar Reminders to assure i can remind my cg And all of documents that Needed to update will keep it updated.
41.(b)(7)	cg made an appointment to get TB Test. Scg get the result and give me A copy.pcg was place to binder sept. 6,2023.	9/6/2023	Home will assure to use wall calender/ calender reminders for cg before The expiration/due of the documents need To be done.
50.(a)	cg explain to scg to perform the Fire Drill today. cg perform and did with Pcg.records was place to binder.	9/5/2023	Home will assure that CG will need to Train their CG as a policy and procedure And for safety for everyone. CG will do Every month. pcg make sure that cg Will do read first the policies & procedure And they sign the firedrill after there done. Home will assure that every month Each scg will perform fire drill.

☒ All items that were corrected are attached to this POCPCG's Signature: Date: 9/18/2023☒ CTA has reviewed all corrected items