Foster Family Home - Deficiency Report

[11-800-6]

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Home Name:	Nove Daw	ın Pag	tulingan, CNA	Review ID:	1-220003-5
91-1135 Kiwi Str	eet			Reviewer:	Po Lim
Ewa Beach		HI	96706	Begin Date:	10/25/2023

Foster Family Home Required Certificate

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Provider ID:

6(d)(1) Unannounced visit made for a 2 bed re-certification inspection.

Client #1 is missing form 1147.

1-220003

Deficiency Report issued during CCFFH inspection via email on 10/25/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Ho	me Information Confidentiality	[11-800-16]
16.(b)(5)	Provide training to all employees, and for ho procedures and client privacy rights.	mes, other adults in the home, on their confidentiality policies and
Comment:		
16.(b)(5) No proof that training on confidentiality policies and procedures and client privacy rights was provided to CG#3.		
Foster Family Ho	me Personnel and Staffing	[11-800-41]

41.(b)(4)	Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with section 11-800-7.(b)(2).
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.4. No disclosure form present for CG# 2, CG#3, and CG#4.

41.(b)(8) CCFFH did not have evidence of current Bloodborne Pathogen/Infection control training for CG# 1, CG#2, and CG#3. CG#4 is missing bloodborne pathogen / infection control training.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#1, CG#2, and CG#4. CG#1 requires 12 hours of in-service training, but had only 4 hours attended in 2022. No annual in-service training hours for CG# 2 and CG#4 for 2022 present in record.

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[11-800-46]

Foster Family Home Fire Safety

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

46.(b)(2)- CG#3 and CG#4 did not have evidence of conducting a monthly fire drill within the past 12 months.

Foster Family I	Home Quality Assurance	[11-800-50]
50.(a) The home shall have documented internal emergency management policies and procedures for emergency		
Comment:	situations that may affect the client, such as but not limited	10.

50.(a) - The CCFFH did not have evidence that a documented internal emergency management policy and procedure was in place. CG#2, CG#3, and CG#4 did not receive the training.

Foster Family H	ome	Insurance Requirements	[11-800-51]
51.(a)(1)	General;		
Comment:			

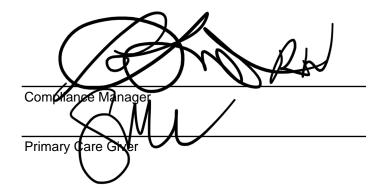
51.(a)(1) - The CCFFH did not have evidence that all CGs are included on the liability insurance policy. CG# 3 and CG#4 is not included on the policy.

Foster Family H	ome Records	[11-800-54]
54.(c)(2)	Client's current individual service plan, and when appropria	ate, a transportation plan approved by the department;
54.(c)(5)	Medication schedule checklist;	
54.(c)(6)	Daily documentation of the provision of services through p social worker monitoring flow sheets, client observation sh health, safety, or welfare of, or the provision of services to	eets, and significant events that may impact the life,
Comment:		

54(c)(2) No current service plan present for Client# 2. Last one in record is dated 10/24/2022.

54(c)(5) Current MAR for October 2023 was not documented daily. Last documented was 10/23 to 10/24 for Client# 1 and Client#2..

54(c)(6) Partial documentation of ADL flow sheet present for Client# 1 and #2 for October 2023.



Date