

Foster Family Home - Deficiency Report

Provider ID: 1-563545

Home Name: Rochelle R. Domingo, CNA

Review ID: 1-563545-17

94-390 Hoaeae Street

Reviewer: Po Lim

Waipahu

HI

96797

Begin Date: 10/13/2023

Foster Family Home	Required Certificate	[11-800-6]
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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.

Deficiency Report issued during CCFFH inspection via email on 10/13/2023 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home	Background Checks	[11-800-8]
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8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

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(a)(2) APS/CAN checks were overdue/lapsed for CG#1.

8(c) State Name Check (eCrim) was overdue for CG# 3 and HHM# 2.

Foster Family Home	Personnel and Staffing	[11-800-41]
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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)(5)(C)(i) Have a valid driver's license;

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

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

Comment:

41.b.4 No updated disclosure form present for CG# 1.

41.b..5.c.ii. CG# 3 have an expired ID on 2/19/2018.

41.(b)(7) CCFFH did not have evidence of current TB clearance for CG#2 and HHM# 1. Expired on 9/29/2022.

41.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG# 3. CG #1 is missing first aid training. CG#2 have expired CPR/First Aid training, expiration date of 10/1/2023. CG#1 and CG#2 have expired Bloodborne Pathogen training on 10/1/2022, missing renewal. CG#3 has expired Bloodborne Pathogen training on 1/19/2023, missing renewal.

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3 Person Staffing

3 Person Staffing Requirements

(3P) Staff

(3P)(b)(2) Staff Allowing the primary caregiver to be absent from the CCFFH for no more than twenty-eight hours in a calendar week, not exceed five hours per day; provided that the substitute caregiver is present in the CCFFH during the primary caregiver's absence. Where the primary caregiver is absent from the CCFFH in excess of the hours, the substitute caregiver is mandated to be a Certified Nurse Aide, per 321-483(b)(4)(C)(D) HRS.

Comment:

(3P)(b)(2) No evidence that a 3-bed sign out sheet was in use at the CCFFH. CTA Compliance manager was unable to verify the number of hours CG#2 and CG#3 (NA) worked in a day or week.

3 Person Fire Safety, Natural Disaster

3 Person Fire Safety

(3P) Fire

(3P)(b)(1) Fire shall be conducted monthly

Comment:

(3P)(b)(1) The CCFFH did not have evidence that fire drills had been conducted monthly. Missing 9/2023, 1/2023, 12/2022, 11/2022, and 10/2022.

Compliance Manager

Primary Care Giver

Date

Date