

# Foster Family Home - Deficiency Report

**Provider ID:** 1-100030

**Home Name:** Resurreccion Buan, CNA

**Review ID:** 1-100030-20

91-1044 Uouoa Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 11/2/2023

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 11/2/2023 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 lapsed for CG# 2 and HHM# 2.  
APS/CAN was due on or before 1/20/2023 and was completed on 1/31/2023.

8(c) State Name Check (eCrim) was lapsed for CG# 2 and HHM# 2. State Name Check (eCrim) was due on or before 8/24/2023 and was completed on 8/25/2023.

3 Person Staffing	3 Person Staffing Requirements	(3P) Staff
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(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 for CG# 2 at this time.

Foster Family Home	Fiscal Requirements	[11-800-52]
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52.(b) The home shall maintain fiscal records, documents and other evidence that sufficiently and properly reflect all funds received, and all direct and indirect expenditures of any nature related to the home's operation.

Comment:

52.(b) - No fiscal records present for 2023.

# Foster Family Home - Deficiency Report

Foster Family Home

Records

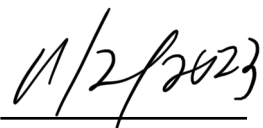
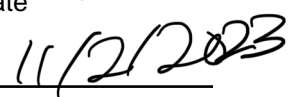
[11-800-54]

54.(c)(5) Medication schedule checklist;

Comment:

54(c)(5) No MAR present for November 2023 for Client# 1 and #2.  
The MAR for Client# 1 is partially logged in for October.

  
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Compliance Manager  
  
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Primary Care Giver

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date