

Foster Family Home - Deficiency Report

Provider ID: 1-230007

Home Name: Sweet Pouli, CNA

Review ID: 1-230007-3

85-844 Lihue Street

Reviewer: Po Lim

Waianae HI 96792

Begin Date: 12/5/2023

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 2 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 12/05/2023 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)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1) Fingerprint was overdue for CG#3 and HHM#1. Fingerprint results were not present in the CCFFH file.

Foster Family Home	Information Confidentiality	[11-800-16]
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16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5) No proof that training on confidentiality policies and procedures and client privacy rights was provided to CG#2, CG#3, and HHM# 1.

Foster Family Home	Personnel and Staffing	[11-800-41]
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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.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG# 2. CG# 2 requires 8 hours of in-service training, but had only 0 hours attended in 2022.

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Foster Family Home

Client Care and Services

[11-800-43]

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3) No RN delegation present for Client #1 for CG#2 and CG#3.

Foster Family Home

Fire Safety

[11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.


Comment:

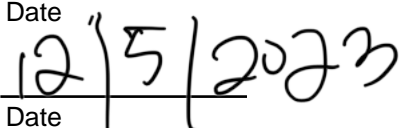
46.(a) - Last fire drill present in record was documented on 10/2023. No fire drill documentation present for November 2023.



Compliance Manager


Primary Care Giver



Date


Date

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

PCG's Name on CCFFH Certificate: Sweet Pouli

(PLEASE PRINT)

CCFFH Address: 85-844 Lihue ST, Waianae HI 96792

(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	Fingerprint was done for CG#3 and HHM #1	12/08/23	Home use a wall calendar to put all due dates on Background check will be done at least 2 week before due date to prevent future lapses
16.b.5	Proof of training was provided CG2, CG3 and HHM#1 It was placed into home record	12/11/23	Make sure put in the home Folder
41.c	This training 2022 I just start my Foster 2023	12/05/23	wasn't apply to me OK. (TV)
43.c.3	RN Delegation was done CG#2 and CG#3 by clients CMA It was placed into the client record	12/08/23	Home will notify clients CMA that RN delegation needs to be done within same day of a caregivers being add to the home and put back to the home folder
46.a	Fire Drill updated and put on home folder	12/05/23	home always check Fire drill updated home Folder what missing or need to do ahead of time

☒ All items that were corrected are attached to this POC

PCG's Signature: _____

Date: 01/12/24☒ CTA has reviewed all corrected items