## Foster Family Home - Deficiency Report

Provider ID: 1-170026

Home Name: Mario Pascual, CNA Review ID: 1-170026-11

 92-1258 Kaleo Place
 Reviewer:
 Po Lim

 Kapolei
 HI
 96707
 Begin Date:
 2/1/2024

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 2/1/2024 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)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8(a)(2) APS/CAN checks were overdue for CG# 2. APS/CAN was due on or before 3/29/2023.

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Foster Family	Home	Personnel and Staffing	[11-800-41]
41.(a)(2)	Be a NA	, an LPN, or RN;	
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.		
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.a.2. CG#2 have an expired CNA license on file. Expiration on 10/31/2022.
- 41.(b)(7) CCFFH did not have evidence of current TB clearance for CG# 2. CG# X TB clearance expired and was due on/before 5/25/2023.
- 41.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG#2 and CG#3. CG#2 CPR/FA was due on/before 6/29/2022. CG# 3 CPR/1st aid are missing from file.

CCFFH did not have evidence of current Bloodborne Pathogen/Infection control training for CG#2 and CG#3. CG#2 was due on/before 1/2023. CG#3 was missing BPP/IC from file.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#2 and CG#3. No annual in-service training hours for CG#2 and CG#3 present in record.

Compliance Manager

**Primary Care Giver** 

Date 2/1/2024

Date