Foster Family Home - Deficiency Report

1-562729 **Provider ID:**

Home Name: Jhanette Navarrete, CNA **Review ID:** 1-562729-13

91-610 Kilipoe Street Reviewer: Po Lim

Ewa Beach HI 96706 Begin Date: 3/21/2024

Foster Family	/ Home R	equired 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 3.21.2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family H	lome Personnel and Staffing	[11-800-41]		
41.(b)(8)	Have documentation of current training in blood resuscitation, and basic first aid.	porne pathogen and infection control, cardiopulmonary		
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:

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41.(b)(8) CCFFH did not have evidence of current Bloodborne Pathogen/Infection control training for CG# 1 and CG#2. It was due on/before 1/30/2024. No new in file.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#1, #2, and #3.

CG# 1 requires 12 hours of in-service training, but had only 2 hours attended in 2023.

CG#2 and CG#3 was required to have 8 hours in 2023, but only had 6 and was missing 2 annual in-service training hours.

Foster Family	/ Home	Fire Safety	[11-800-46]	
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 did not have evidence of conducting a monthly fire drill within the past 12 months.

Date

3/21/2024 1:01:33 PM