Foster Family Home - Deficiency Report

Provider ID: 1-230053

Home Name: Madona Dela Cruz, CNA Review ID: 1-230053-2

98-248A Aiea Kai Place Reviewer: Ryan Nakamua

Aiea HI 96701 Begin Date: 4/8/2024

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 CCFFH inspection for 2 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 4/8/2024).

Foster Family Home Background Checks [11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1): No documentation provided by CCFFH of 2 sets of fingerprints in consecutive years for CG#5. Documents provided by CCFFH show only 1 set of fingerprints dated 3/30/2023.

Foster Family Home Information Confidentiality [11-800-16]

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 documentation of confidentiality training completed for CG#2, CG#3, CG#4, CG#5, HHM#2, and HHM#4.

Foster Family Home Personnel and Staffing [11-800-41]

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.(b)(8): No documentation provided by CCFFH of current first aid training completed for CG#3. No documents provided by CCFFH.

41.(c): No evidence by CCFFH of CG#3 and CG#6 meeting minimum 8 hours of annual in-service training for 2023. No documents provided for CG#3 and documents provided for CG#6 show 6 hours completed.

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Foster Family I	Home Fire Safety	[11-800-46]
46.(a)	,	ent, and maintain a record, in the home, of unannounced fire drills at different times Fire drills shall be conducted at least monthly under varied conditions and shall ectors.
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Comment:

46.(a): No evidence by CCFFH of fire drills conducted monthly while clients reside in CCFFH. No documentation provided for months of 12/2023, 1/2024, and 2/2024.

Foster Family	Home	Medication and Nutrition	[11-800-47]		
47.(d)	Use of	physical or chemical restraints shall be:			
47.(d)(1)	By orde	er of a physician;			
47.(e)	The caregivers shall obtain specific instructions and training regarding special feeding needs of clients from a person who is registered, certified, or licensed to provide such instructions and training.				

Comment:

47.(d)(1): No documentation provided by CCFFH of physician order for use of bed side rails for client #1.

47.(e): Observed client #1 not being given chopped/minced food for lunch as prescribed. Client given whole sandwich that is not chopped.

Compiante Manager

Primary Care Giver

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