

Foster Family Home - Deficiency Report

Provider ID: 4-230019

Home Name: Myrna Clemente, NA

816 Olena Street

Wailuku HI 96793

Review ID: 4-230019-3

Reviewer: Terri Van Houten

Begin Date: 2/8/2024

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 by within 30 days of issuance.

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.

41.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

Comment:

41.(b)(8) - CCFFH did not have evidence that CG#4 had completed CPR and first aid training.

41.(b)(8) - CCFFH did not have evidence that CG#4 had completed blood borne pathogen and infection control training.

41.(c) - CCFFH did not have evidence that CG#4 had completed 8 hours of inservice training.

41.(e) - CG#4 had been added as a less than 3 hour caregiver on 3/30/23. CG#4 had not received department approval as a CG prior to being added to the CCFFH.

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:

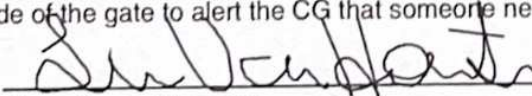
46.(a) - The CCFFH did not have evidence that CG#4 had conducted/facilitated a fire drill in the last 12 months.

Foster Family Home Quality Assurance [11-800-50]

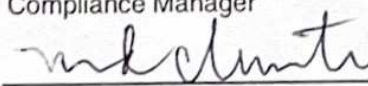
50.(e)(2) Inspection of service sites;

Comment:

50.(e)(2) - The CCFFH had a lock/closed gate located at the drive way entrance. The CCFFH did not have a notification process from outside of the gate to alert the CG that someone needed access to the dwelling.


Compliance Manager


Date


Primary Care Giver


Date