

Foster Family Home - Deficiency Report

Provider ID: 1-577702

Home Name: Ofelia Mendez, CNA

Review ID: 1-577702-14

94-070 Poailani Circle

Reviewer: Ryan Nakamua

Waipahu

HI 96797

Begin Date: 3/11/2024

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 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 3/11/2024).

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 evidence by CCFFH of confidentiality training completed for CG#5 and CG#6. No documentation provided.

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

41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with section 11-800-7.(b)(2).

Comment:


41.(b)(4): No evidence by CCFFH of documentation of substitute caregiver disclosure assessment for CG#5 and CG#6. No documents provided.

Foster Family Home Client Rights [11-800-53]

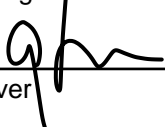
53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:


53.(b)(9): No locks on doors for clients rooms and client bathrooms.




Compliance Manager



Primary Care Giver



Date


Date

CTA RN Compliance Manager: Terry Van Houten R.N.

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

PCG's Name on CCFFH Certificate: Ofelia Mendez
(PLEASE PRINT)

CCFFH Address: 94-070 Poailani Circle Waipahu Hawaii 96797
(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?
16 (b) (5).	Confidentiality training was completed for CG #5. It was placed in the home record.	3-22-2024.	Home will make a checklist of each caregiver (Primary and Substitute) the trainings needed in the home; and provide trainings on the confidentiality procedure.
	Confidentiality training was completed for CG#6. It was placed in home record.	3-22-2024	Privacy rights of the clients to caregivers and adults staying in the home . Make sure the training is complete and compiled in the home folders.
41 (b) (4)	Documentation of substitute caregiver assessment was obtained by CG#5. It was compiled on the record book of SC#5	3-22-2024.	Home will make a checklist of each Primary/ Substitute caregiver who has completed the psychosocial assessment.
	Documentation of substitute caregiver disclosure assessment for CG#6 was obtained and placed in home-record for SC#6.	3-22-2024.	Make sure the assessment was signed by the Primary and Substitute caregiver and compiled in the caregiver's chart.
41 (b)(4)	Locks on doors of the bathroom and 3 doors of the client's rooms are change w/ padlocks. Security padlocks was installed in all three clients rooms and in the bathroom. All the rooms are secured.	3-23-2024	Caregiver changed the padlock w/ security locks on the three clients room and bathroom for for security and privacy purposes. This is to secure their belongings especially their privacy for their treatment and personal care. I have to make sure the clients are treated with respect

and for consideration of their privacy.

All items that were corrected are attached to this POC

PCG's Signature: Ofelia Mendez

Date: 3-26-2024

CTA has reviewed all corrected items