

Foster Family Home - Deficiency Report

Provider ID: 1-210058

Home Name: Richard Arcena, RN

Review ID: 1-210058-7

94-1142 A Limahana Street

Reviewer: Ryan Nakamua

Waipahu HI 96797

Begin Date: 4/24/2024

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: 4/24/2024).

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;

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

Comment:

8.(a)(1)(2): Lapse of APS/CAN/criminal background check for CG#1, CG#2 and HHM#1. CG#1 and CG#2 was due 4/29/2023 and completed 7/06/2023. HHM#1 was due 5/4/2021 and completed 7/6/2023.

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

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.(g) The primary and substitute caregivers shall be assessed by the department for competency in basic caregiver skills and specific skill areas needed to perform tasks necessary to carrying out each client's service plan. The documentation of training and skill competency of all caregivers shall be kept in the client's, case manager's, and caregiver's current records with the current service plan.

Comment:

41.(b)(7): No documentation of current TB clearance for CG#1. TB clearance was due on 7/18/2023.

41.(b)(8): Lapse of CPR/AED certification for CG#1. CPR/AED certification was due by 10/31/2023 and completed on 2/07/2024.

41.(b)(8): No documentation provided by CCFFH of bloodborne pathogen training completed prior to 7/08/2023 for CG#1.

41.(g): No documentation of basic caregiver skills were checked by client #1's case management agency for CG#1.

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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): No documentation of fire drills conducted monthly and at different times of the day. Documents provided by CCFFH show last fire drill was conducted on 6/20/2023.

Foster Family Home

Medication and Nutrition

[11-800-47]

47.(d) Use of physical or chemical restraints shall be:

47.(d)(1) By order of a physician;

Comment:

47.(d)(1): No documentation of physician order for use of bed side rails for client #1 and client #2.

Foster Family Home

Physical Environment

[11-800-49]

49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(c)(3): Holes noted in 2 screen doors of CCFFH.

Foster Family Home

Records

[11-800-54]

54.(b) The home shall maintain separate notebooks for each client in a manner that ensures legibility, order, and timely signing and dating of each entry in black ink. Each client notebook shall be a permanent record and shall be kept in detail to:

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

54.(c)(5) Medication schedule checklist;

54.(c)(8) Personal inventory.

Comment:

54.(b): No documentation of progress notes provided by CCFFH of client #1 from 2/2023 to 4/2024. No progress notes provided of client #2 since client's admission in 3/2024.

54.(c)(2): Current service plan for client #1 not signed by client's POA.

54.(c)(5): Discrepancy noted of 1 medication's dosage on hand compared to what has been documented to be given according to medication administration record (MAR) for client #1.

54.(c)(5): 3 medications not on hand as ordered per client #2's MAR.

54.(c)(8): No documentation provided by CCFFH of client #2's personal belongings inventory.


Compliance Manager

Primary Care Giver

4/24/24
Date
4/24/24
Date