

Foster Family Home - Deficiency Report

Provider ID: 1-150042

Home Name: Leilanie Tanaka, NA

Review ID: 1-150042-14

91-1058 Apuu Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 4/25/2024

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 visit made for a 2 bed re-certification inspection.

Client #2 is missing Form 1147.

Deficiency Report issued during CCFFH inspection via email on 4/25/2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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.(c) The department shall make a name inquiry into the criminal history records for the first two years a case management agency is licensed or a home is certified and annually or biennially thereafter depending on the licensure status of the case management agency or certification status of the home.

Comment:

8.(a)(1) Second Fingerprint check is overdue for CG#2 was due on/before 11/28/2022.

8.(c) State Name Check (eCrim) was overdue for CG# 1, CG#3. State Name Check (eCrim) was due on or before 1/28/2024 and 4/24/2024 respectively.

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 proof that training on confidentiality policies and procedures and client privacy rights was provided to CG#2 and CG#4.

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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).
- 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.(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.(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.4. No disclosure form present for CG#4.

41.(b)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG#2. CG# 2 TB clearance expired, was due on/before 8/14/2023.

41.(b)(8) CCFFH did not have evidence of current CPR/First Aid/Bloodborne Pathogen/Infection control training for CG# 2. CG# 2 CPR/1st aid expires 2/11/2024 and BBP/IC expired on 1/8/2024. 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, CG#2, and CG#3.

CG# 1 requires 12 hours of in-service training, but had only 7 hours attended in 2023.

CG#2 and CG#3 requires 8 hours of in-service training, but had only 7 hours attended in 2023.

41.g. No basic skills check present in record for CG# 4.

Foster Family Home

Client Care and Services

[11-800-43]

- 43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3) No RN delegation present for Client #2 for CG#2, #3, and #4.

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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.

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(a) - Last fire drill present in record was documented on 9/2023. No fire drill documentation present for 5/2023, 7/2023, 10/2023 through 3/2024.

46.(b)(2)- CG# 2 did not have evidence of conducting a monthly fire drill within the past 12 months.

Foster Family Home

Insurance Requirements

[11-800-51]

51.(a)(1) General;

Comment:

51.(a)(1) - The CCFFH did not have evidence of a current liability insurance policy for the business.

Foster Family Home

Records

[11-800-54]

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

Comment:

54(c)(2) No current service plan present for Client#2. Last one in record is dated 2/9/2023.

Compliance Manager

Primary Care Giver

Date

Date

CTA RN Compliance Manager: PO LIM

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

PCG's Name on CCFFH Certificate: LEILANIE TANAKA

(PLEASE PRINT)

CCFFH Address: 91-1058 APUU ST. EWA BEACH, HI 96706

(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?
6.(d)(1)	CG#1 secured the Form 1147 through [REDACTED] now it is in our Client Book for Client #2	5/1/2024	Home will ensure Form 1147 should be in the book for proper documentation notifying the Case management Agency with my Apple Note reminder.
8.(a)(1)	CG #2 submitted her Second Fingerprint dated 11/28/2022	4/27/2024	Home will remind substitute caregivers on their obligations to submit the said document a week before the due date.
8.(c)	State Name Check (Ecrim) for CG#1 and CG#2 has been secured	4/24/2024	Home will use a wall calendar to put due dates on State Name Check (Ecrim). It should be done at least a week before the due date.
16.(b)(5)	CG#4 Proof of Training on Confidentiality Policies and Procedures was signed.	5/2/2024	Home will ensure substitute caregivers to sign the Training on Confidentiality Policies and Procedures immediately upon employment.
41.(b)(4)	Disclosure Form for CG#4 has been filled and submitted	5/2/2024	Home will ensure substitute caregivers to fill and submit the Disclosure Form to apply for CTA as substitute. List of the documents needed should be provided.

All items that were corrected are attached to this POC

PCG's Signature: _____

Date: 5/24/2024

CTA has reviewed all corrected items

CTA RN Compliance Manager: PO LIM

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

PCG's Name on CCFFH Certificate: LEILANIE TANAKA
(PLEASE PRINT)

CCFFH Address: 91-1058 APUU ST. EWA BEACH, HI 96706
(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?
41.(b)(7)	CG #2 current TB clearance is not expired but good until 1 year (8/14/2023-8/14/2024)	4/24/2024	Home should make a list of documents to be secured atleast a week before the due date for all caregivers.
41.(b)(8)	CG #2 CPR/First Aid/Bloodborne Pathogens/Infection control training for CG #2.CPR/1st aid has been done and submitted (1/8/2024-1/8/2025)	4/27/2024	Home should make a list of documents to be secured atleast a week before the due date for all caregivers.
41. (c)	CG#1 12 hours of in-service training has been done and submitted (1/8/2024-1/8/2025) CG#2 and CG#3 8 hours in-service training has been done and submitted (1/8/2024-1/8/2025)	4/27/2024	Home should make a list of documents to be secured atleast a week before the due date for all caregivers.
41.(g)	CG#4 basic skills has been done and signed.	5/2/2024	Home should remind caregivers and give the basic skills training before employment.
43. (c)(3)	RN delegation for client CG#2,#3,#4 has been delegated by the nurse	4/30/2024	Home should ensure that all skills should be delgated by the nurse. Home should make a list of documents to be secured atleast a week before the due date for all caregivers.

All items that were corrected are attached to this POC

PCG's Signature: 

Date: 5/24/2024

CTA has reviewed all corrected items

CTA RN Compliance Manager: PO LIM

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

PCG's Name on CCFFH Certificate: LEILANIE TANAKA
(PLEASE PRINT)

CCFFH Address: 91-1058 APUU ST. EWA BEACH, HI 96706
(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?
46. (a)	Monthly fire drills were done, but it was not documented. This cannot be corrected.	4/24/2024	Home should ensure to document all fire drills and not miss out any of it. Mark wall calendar for reminder.
46.(b)(2)	CG#2 did not conduct monthly fire drill within 12 months. This cannot be corrected.	4/24/2024	Home should make a list of reminder for specific obligation monthly of caregivers to do the fire drill and document.
51.(a)(1)	Evidence of current liability insurance for the business has been renewed and kept in the book.	4/25/2024	Home should make a reminder to renew the liability insurance yearly a week before the due date.
54.(c)(2)	Client #2 current service plan is updated (2/9/2024)	4/25/2024	Home should ensure that service plan is updated every year. There should be a reminder in the calendar.

All items that were corrected are attached to this POC

PCG's Signature: _____

Date: 5/24/2024

CTA has reviewed all corrected items