

Foster Family Home - Deficiency Report

Provider ID: 1-569931

Home Name: Marcelina Tito, CNA

Review ID: 1-569931-14

91-851 Kapana Place

Reviewer: Po Lim

Ewa Beach

HI 96706

Begin Date: 5/28/2024

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 3 bed annual inspection.

Client #2 and Client #3 were missing Form 1147. Not present in the clients binders.

Deficiency Report issued during CCFFH inspection via email on 5/28/2024 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)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

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)(2) APS/CAN checks were expired for CG#4. Expiration was 5/10/2024, and no renew in the file.

8(c) State Name Check (eCrim) was lapsed for CG#3 and CG#4.

CG#3 State Name Check (eCrim) was due on or before 7/18/2023 and was completed on 8/29/2023.

CG#4 State Name Check (eCrim) was due on or before 4/28/2024 and was completed on 5/23/2024..

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

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

41.(b)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG# 3. CG# 3 TB clearance expired was due on/before 4/10/2024, no renew in the file, and the TB form was not signed by a provider.

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 1/1/2023.

Compliance Manager

Primary Care Giver

Date

Date