Foster Family Home - Deficiency Report

Provider ID: 1-230051

Marie Cristina Soliven, CNA 1-230051-3 **Home Name: Review ID:**

94-242 Pupukoae Street Reviewer: Po Lim

Waipahu HI 96797 Begin Date: 2/26/2024

[11-800-6] **Foster Family Home Required Certificate**

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.

Deficiency Report issued during CCFFH inspection via email on 4/26/2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home Information Confidentiality [11-800-16]

Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and 16.(b)(5)

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 HHM#4.

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

The primary and substitute caregivers shall be assessed by the department for competency in basic caregiver skills 41.(g)

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.g. No basic skills check present in record for CG#2.

Foster Family Home [11-800-43] Client Care and Services

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 #1 and Client#2 for CG#2.

Foster Family Home Insurance Requirements [11-800-51]

51.(a)(2) Automobile: and

Comment:

51.a.2. CCFFH did not meet the minimum requirement for vehicle insurance.

Date Date 2027

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