

# Foster Family Home - Deficiency Report

**Provider ID:** 1-559156

**Home Name:** Vilma Rabena, CNA

**Review ID:** 1-559156-16

91-933 Ahona Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 5/24/2024

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<b>Foster Family Home</b>	<b>Required Certificate</b>	<b>[11-800-6]</b>
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6.(d)(1) Comply with all applicable requirements in this chapter; and

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Comment:

6(d)(1) Unannounced visit made for a 2 bed re-certification inspection.

Expired Form 1147 for Client #1.

Deficiency Report issued during CCFFH inspection via email on 5/24/2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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<b>Foster Family Home</b>	<b>Background Checks</b>	<b>[11-800-8]</b>
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8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

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Comment:

8.(a)(1) Fingerprint was overdue CG#3 (HHM#2).

Second Fingerprint check is overdue for CG#3 (HHM#2) was due on/before 5/01/2023. Second notice.

# Foster Family Home - Deficiency Report

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.(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)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG#1. CG#1 TB clearance expired, was due on/before 1/3/2024 and was not completed.

41.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG# 3. It was due on/before 7/1/2023. No renew on file.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#1. CG# 1 requires 12 hours of in-service training, but had only 10 hours attended in 2023.

41.g. No basic skills check present in record for CG#2 and CG#3.

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.

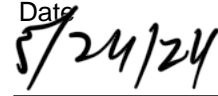
Comment:

43.(c)(3) No RN delegation present for Client #1 for CG #2 and #3.

  
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Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date