

Foster Family Home - Deficiency Report

Provider ID: 1-130050

Home Name: Baltazar Mayo, CNA

Review ID: 1-130050-18

91-706 Poloula Place

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 8/12/2024

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 re-certification inspection.

Client #1 is missing Form 1147.

Client #3 has expired Form 1147 on 1/11/2023.

Deficiency Report issued during CCFFH inspection via email on 8/12/2024 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;

Comment:

Second Fingerprint check is overdue for CG#1, CG#3, and CG#5.

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#3.

Foster Family Home - Deficiency Report

Foster Family Home	Personnel and Staffing	[11-800-41]
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- 41.(a)(3) Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and

- 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(a)(3) No job experience form present for CG#5.

- 41.(b)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG#3 and CG#5. Expired 5/21/22 and 11/14/23 respectively.

- 41.(b)(8) CCFFH did not have evidence of current CPR/First Aid/Bloodborne Pathogen/Infection control training for CG#3. CPR was due on/before 9/9/2021. Bloodborne/IC was missing from file.

- 41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#3. CG#3 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 Client #1, #2, and #3. For CG#2-#5.

3 Person Staffing	3 Person Staffing Requirements	(3P) Staff
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- (3P)(b)(2) Staff Allowing the primary caregiver to be absent from the CCFFH for no more than twenty-eight hours in a calendar week, not exceed five hours per day; provided that the substitute caregiver is present in the CCFFH during the primary caregiver's absence. Where the primary caregiver is absent from the CCFFH in excess of the hours, the substitute caregiver is mandated to be a Certified Nurse Aide, per 321-483(b)(4)(C)(D) HRS.

Comment:

- (3P)(b)(2) No evidence that a 3-bed sign out sheet was in use at the CCFFH. CTA Compliance manager was unable to verify the number of hours CG#2, #3, #5(NA) worked in a day or week.

Foster Family Home	Client Care and Services	[11-800-43]
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- 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# 1, #2, #3, #4, and #5.
- No RN delegation present for Client #2 for CG #3, #4, and #5.
- No RN delegation present for Client #3 for CG #5.

Foster Family Home - Deficiency Report

**3 Person Fire Safety,
Natural Disaster**

3 Person Fire Safety

(3P) Fire

- (3P)(b)(1) Fire shall be conducted monthly
- (3P)(b)(2) Fire shall be held at different times of the day, evening, and night
- (3P)(b)(4) Fire shall include testing of smoke detectors
- (3P)(b)(6) Fire shall include all SCGs at least once per year

Comment:

(3P)(b)(1)(2)(4)(6) The CCFFH did not have evidence that fire drills had been conducted monthly/were being held at different times of the day, evening, and night/included testing of the smoke detectors/included each CG at least once per year. All CGs did not conduct fire drill for the past 12 months. Last fire drill was conducted on 3/13/2023.

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

Comment:

54.c.2. Client #1 service plan is expired on 8/16/2023.

54(c)(5) No MAR present for August 2024 for Client# 3.

Client #2 MAR was not documented daily. Sheet not completed from 7/16/24 to 7/31/24, and 8/8/24 to 8/11/24.

Compliance Manager

Primary Care Giver

Date

Date