

# Foster Family Home - Deficiency Report

Provider ID: 1-589682

Home Name: Cecilia Supnet, CNA

Review ID: 1-589682-9

94-1174 Heahea Street

Reviewer: Ryan Nakamura

Waipahu HI 96797

Begin Date: 7/2/2024

## 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 CCFFH inspection for 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 7/17/2024).

## 3 Person Staffing 3 Person Staffing Requirements (3P) Staff

(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) Staff: No documentation provided by CCFFH of caregiver sign-in and sign-out.

## Foster Family Home Medication and Nutrition [11-800-47]

47.(d) Use of physical or chemical restraints shall be:

47.(d)(1) By order of a physician;

Comment:

47.(d)(1): No documentation of physician order for use of bed side rails for client #1.

## Foster Family Home Quality Assurance [11-800-50]

50.(b) Adverse events shall be reported

50.(b)(2) A written report shall be sent to the case management agency within seventy-two hours, excluding weekends and holidays, following the verbal report required under paragraph (1).

Comment:

50.(b)(2): No documentation of written report of adverse events completed and sent to client #2 and client #3's case management agency. Client #2 had one 2 separate ER visits and client #3 had 1 ER visit in the past 12 months. CCFFH has documented that clients' case management agencies were notified of adverse events.

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Foster Family Home

Records

[11-800-54]

54.(b) The home shall maintain separate notebooks for each client in a manner that ensures legibility, order, and timely signing and dating of each entry in black ink. Each client notebook shall be a permanent record and shall be kept in detail to:

54.(b)(2) Provide information for necessary follow-up care for the client.

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

Comment:

54.(b)(2): No documentation of any progress notes for all clients regarding any events or their condition since their admissions to this CCFFH.

54.(c)(2): No documentation of client #1's service plan addressing that client is currently receiving hospice services.



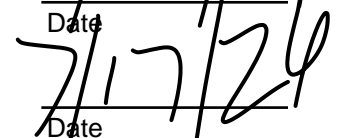
Compliance Manager



Primary Care Giver



Date



Date