

Foster Family Home - Deficiency Report

Provider ID: 1-150063

Home Name: Flordeliza S. Onaga, CNA

Review ID: 1-150063-14

94-1209 Henokea Street

Reviewer: Ryan Nakamura

Waipahu

HI 96797

Begin Date: 6/19/2024

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 annual inspection for 3 bed CCFFH. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 6/19/2024).

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

(3P)(a)(3) Staff A current Licensed Practical Nurse license plus one year of experience in a home setting. If the license is expiring within the next 30 days, evidence of a new license must be provided, substitute caregivers have a minimum of one year work experience as a caregiver in a community residential setting or in a medical facility, per 321-483(b)(4)(E) HRS, or;

Comment:

(3P)(a)(3) Staff: No documentation of job experience of 1 year for CG#2 provided by CCFFH.

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 documentation of RN delegations for CG#2 and CG#4 for client #1.

3 Person Fire Safety, Natural Disaster 3 Person Fire Safety (3P) Fire

(3P)(b)(1) Fire shall be conducted monthly

(3P)(b)(5) Fire shall be documented in a log with the date and time of each drill, the time it took to complete the evacuation, and names of participants

(3P)(d) Fire All caregivers and designated individuals must have been trained to implement appropriate emergency procedures in the event of a fire, natural disaster or other emergency.

Comment:

(3P)(b)(1)(5) Fire: No documentation of fire drills conducted monthly at CCFFH. Last documented fire drill conducted 11/20/2023.

(3P)(d) Fire: No documentation provided by CCFFH of fire drill conducted by CG#5 within the past 12 months.

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Client Rights

[11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9): No documentation of written consent/acknowledgement of use of camera/monitor in common living and dining area for client #1.

Foster Family Home


Records

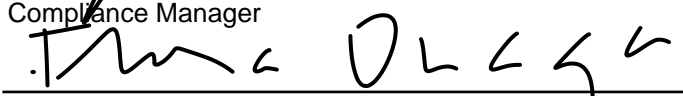
[11-800-54]

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;


Comment:


54.(c)(6): No documentation of daily personal care or skilled nursing daily check list by CCFFH since client #1's admission.



Compliance Manager


Primary Care Giver



Date


Date

CTA RN Compliance Manager: Ryan Nakamura RN BSN

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800

PCG's Name on CCFFH Certificate: Flordeliza Onaga
(PLEASE PRINT)

CCFFH Address: 94-1209 Henoeka St. Waipahu, Hawaii
(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
(3P)(a)(3)	Documentation of Job Experience for CG Nos 2 was obtained and placed into home record	07/17/24	Home will see to it that the required documents are completed and updated upon submission before being added to the home. within seven days
43.(c)(3)	Documentation of RN delegation was obtained for CG Nos. 2 and 4 and placed into home record.	07/05/24	Home will notify the clients CMA that RN delegation needs to be done within seven days of the caregiver being added to the home.
(3P)(b)(1)(5)	PCG conducted Fire Drill monthly and placed the document into home record	06/20/24 and 07/15/24	PCG will use a wall calendar to write a reminder for the scheduled fire drill for each month.
(3P)(d)	CG nos. 5 conducted Fire Drill with the PCG .	06/20/24	PCG will use a wall calendar and put a sticky note for the scheduled fire drill on each month. PCG will make an schedule for each of the caregiver at least one or twice a year and is kept in the chart for referencel.
53.(b)(9)	A written consent from the family was obtained for the use of camera/monitor in common living room for client nos. 1	06/20/24	Home shall follow Hawaii Administrative rules in regards to client's privacy. PCG will use a sticky note

All items that were corrected are attached to this POC

PCG's Signature: Flordeliza S. Onaga

Date: 7/18/2024

CTA has reviewed all corrected items

CTA RN Compliance Manager: Ryan Nakamura RN BSN

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800

PCG's Name on CCFFH Certificate: Flordeliza Onaga
(PLEASE PRINT)

CCFFH Address: 94-1209 Henoeka St. Waipahu, Hawaii
(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
54.(c)(6)	CG updated the record for the daily personal care of client nos. 1	06/19/24	CG must see to it that the record for the daily personal care of the client is recorded when taken in each time in a regular basis and kept in the patients record. PCG will use a sticky note

All items that were corrected are attached to this POC

PCG's Signature: Flordeliza S. Onaga

Date: 7/18/2024

CTA has reviewed all corrected items