

Foster Family Home - Deficiency Report

Provider ID: 1-180076

Home Name: Margie Malvar, NA

Review ID: 1-180076-13

94-334 Kahuahele Street

Reviewer: Ryan Nakamura

Waipahu HI 96797

Begin Date: 6/24/2024

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 2 bed CCFFH. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 6/24/2024).

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;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1): Lapse of criminal background check for CG#1 based on documents provided by CCFFH. Prior to current ecrim clearance dated 1/18/2024, last document is dated 9/18/2019.

8.(a)(1): No documentation provided by CCFFH of criminal background check for CG#3 in the past 24 months.

8.(a)(2): Lapse of APS/CAN clearance for CG#3 based on documents provided by CCFFH. Prior document to current APS/CAN clearance that is dated 9/8/2023, last document is dated 7/30/2020.

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

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

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): No documentation provided by CCFFH of current TB clearance for CG#1, CG#2, CG#3, and 2 household member minors dated in the past 13 months.

41.(g): No documentation of current CPR/first aid training for CG#2 and CG#3. Last documented certificates expired in 2/2024 for both caregivers.

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Fire Safety

[11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(a)(b)(2): No documentation provided by CCFFH of fire drills conducted by any caregivers at CCFFH in the past 12 months. Last documented fire drill was dated 1/10/2023.

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Physical Environment

[11-800-49]

49.(a)(1) Bathrooms with non-slip surfaces in the tubs and or showers, and toilets adjacent or easily accessible to sleeping rooms;

49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(a)(1): No non-slip mat found in clients' bathroom shower area.

49.(c)(3): Strong urine smell noted while CTA inspected client #2's bedroom.

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Records

[11-800-54]

54.(c)(1) Client's vital information;

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

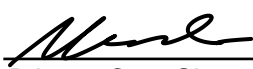
Comment:

54.(c)(1): No documentation of current face sheet for client #1 found in client's chart.

54.(c)(2): No documentation provided by CCFFH of client #2's current service plan for client #2. Service plan provided by CCFFH dated 11/28/2023 and does not address that client is currently on hospice services.



Compliance Manager



Primary Care Giver



Date

Date