

# Foster Family Home - Deficiency Report

Provider ID: 1-220002

Home Name: Maggie Margaret Marquez,  
CNA

1860 Kamehameha IV Road

Honolulu HI 96819

Review ID: 1-220002-7

Reviewer: Ryan Nakamura

Begin Date: 9/10/2024

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

Comment:

6.(d)(1) - Unannounced CCFFH inspection for 2 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 9/10/2024).

CCFFH to increase to 3 bed CCFFH.

Foster Family Home	Personnel and Staffing	[11-800-41]
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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.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

41.(f) The primary caregiver shall maintain a file on all adult household members who are not substitute caregivers with evidence that they have current:

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(b)(7): Evidence provided by CCFFH that CG#1 and CG#2's current TB clearance not signed by physician/APRN/DO.

41.(b)(8): Evidence of lapse of bloodborne pathogen training for CG#1, CG#2, and CG#3. Training was due by 11/5/2023 and completed 1/14/2024.

41.(e): CCFFH applied to increase to 3 bed CCFFH. CG#2 and CG#3 are approved only as substitute caregivers for 2 bed CCFFH.

41.(f)(1): Evidence of lapse of TB clearance for HHM#2, HHM#3, and HHM#5. TB clearance was due by 12/16/2023 and completed 4/8/2024 for HHM#2; HHM#3 was due by 2/23/2024 and completed 8/7/2024; HHM#5 was due by 01/16/2024 and was completed on 5/24/2024.

3 Person Staffing	3 Person Staffing Requirements	(3P) Staff
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(3P)(a)(4) Staff A current Certified Nurses Aide or Nurse Aide certificate plus one year of experience in a home setting. If the certificate is expiring within the next 30 days, evidence of a new certificate 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.

Comment:

(3P)(a)(4) Staff: No documentation provided by CCFFH of minimum 1 year work experience for CG#2 and CG#3.

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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): No documentation provided by CCFFH of physician order for use of bed side rails for client #1.



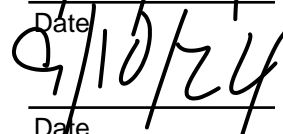
Compliance Manager



Primary Care Giver



Date



Date