

Foster Family Home - Deficiency Report

Provider ID: 1-190097

Home Name: Mary Grace M. Supan, CNA

Review ID: 1-190097-11

1743 Hoolaulea Street

Reviewer: Ryan Nakamura

Pearl City

HI 96782

Begin Date: 9/18/2024

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: 9/18/2024).

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(8): Evidence provided by CCFFH of lapse of CPR/first aid training for CG#3 and CG#4. Training was due by 12/21/2023 and completed 1/24/2024.

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 evidence provided by CCFFH of RN delegation by client #3's case management agency given for topical medication administration for any caregivers.

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

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

Foster Family Home Records [11-800-54]

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

Comment:

54.(c)(5): No documentation provided by CCFFH of time of administration for 7 routine scheduled medications for client #2.

54.(c)(5): 1 Medication order discrepancy noted for client #3. Physician order of dose given routinely and 2 additional doses to be given as needed did not match current medication record administration (MAR).



Compliance Manager



Primary Care Giver

9/18/24
Date
9/18/24
Date