

Foster Family Home - Deficiency Report

Provider ID: 1-180071

Home Name: Lily Ann Austria, CNA

Review ID: 1-180071-14

91-1022 Hooehilu Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 10/24/2024

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 visit made for a 2 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 10/24/2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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)
Second Fingerprint check is overdue for CG#3 was due on/before 1/30/2024.

8(a)(2) APS/CAN checks were overdue for CG #2 and HHM #1.
APS/CAN was due on or before 7/6/2024 and are not present in the CCFFH file.

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5) No proof that training on confidentiality policies and procedures and client privacy rights was provided to CG#4.

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.

41.(f)(2) Background checks

Comment:

41.(b)(8) CCFFH did not have evidence of current First Aid training for CG#3 and CG#4. Missing in both files.

41.(f)(2) CG#1 and CG#3 is missing the CNA registry verification check.

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Foster Family Home

Quality Assurance

[11-800-50]


50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

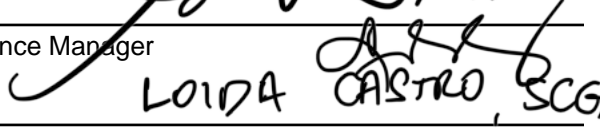
50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

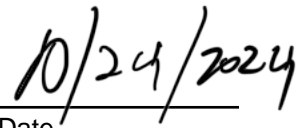
50.(a) - The CCFFH did not have evidence that a documented internal emergency management policy and procedure was in place. CG#4 did not receive the training and sign the acknowledgement form.

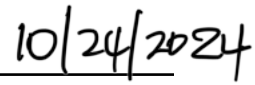
50.(e) - The CCFFH had a gate outside restricting access to the front door that did not have a form of communication which inhibited the announcement of a visitor's arrival to the facility.



Compliance Manager

LOIDA CASTRO, SCG

Primary Care Giver



Date


Date