

Foster Family Home - Deficiency Report

Provider ID: 1-120074

Home Name: Jovelyn Garces, CNA

Review ID: 1-120074-20

2256 Akeukeu Street

Reviewer: Ryan Nakamura

Pearl City HI 96782

Begin Date: 11/20/2024

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: 11/20/2024).

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): No evidence provided by CCFFH of current criminal background check for HHM#2. Background check was due by 3/1/2024.

8.(a)(2): No evidence provided by CCFFH of current APS/CAN clearance for HHM#2. Clearance was due by 3/1/2024.

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

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

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): No documentation provided by CCFFH of current TB clearance for CG#1. TB clearance was due by 12/8/2023 for CG#1.

41.(f)(1): No evidence provided by CCFFH of current TB clearance for HHM#2. No previous documentation provided.

Foster Family Home 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.

Comment:

46.(a): No documentation provided by CCFFH of fire drill conducted in 3/2024.

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Records

[11-800-54]

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

Comment:

54.(c)(5): One medication that client #2 had been administered routinely was not listed in current medication administrative record (MAR).



Compliance Manager



Primary Care Giver

11/20/24

Date
11/20/24

Date