Foster Family Home - Deficiency Report

Provider ID: 1-200065

Home Name: Rhea Joy Nabua, CNA Review ID: 1-200065-11

91-146 Wailohia Place

Reviewer: Po Lim

Begin Date:

Ewa Beach HI 96706

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 visit made for a 3 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 11/20/2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home Personnel and Staffing [11-800-41] 41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home

Comment:

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#2. CG# 2 requires 12 hours of in-service training, but had only 8 hours attended in 2023.

Foster Family Ho	ome (Client Care and Services	[11-800-43]	
43.(c)(3)		n the caregiver following a service pla ent care and services as provided in c	n for addressing the client's needs. The	ne RN case manager may

Comment:

43.(c)(3) No RN delegation present for Client #1 for CG#2 and CG#3.

Compliance Manager

Primary Care Giver

11/20/2071 Date 11/26/2024

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