

Foster Family Home - Deficiency Report

Provider ID: 1-230013

Home Name: Vanessa B. Sacoco, CNA

Review ID: 1-230013-5

94-331 Pupukupa Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 11/8/2024

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 recertification inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days of inspection (issued on 11/8/24)

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

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)(2) Background checks

Comment:

41.(f),(f)(2)- CCFFH with a locked door near kitchen that leads to an upstairs unit. No background checks results (APS, CAN, Fingerprint) and sex offender search results present for adult household members occupying the upstairs unit.

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.

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(a)- CCFFH's monthly fire drills conducted without the indication of time done - am or pm?

46.(b)(2)- CG#6 without evidence of having conducted a monthly fire drill.

Foster Family Home Medication and Nutrition [11-800-47]

47.(c) Medication errors and drug side effects shall be reported immediately to the client's physician, and the case management agency shall be notified within twenty-four hours of such occurrences, as required under section 11-800-50(b). The caregivers shall document these events and the action taken in the client's progress notes.

Comment:

47.(c)- No list of medications' side effects for Client #1.

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Client Rights

[11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Clients' bathroom door lock was broken.

53.(b)(9)- Client #2's closet with a bed mattress and frame stored inside which didn't belong to client.

Foster Family Home

Records

[11-800-54]

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

Comment:

54.(c)(5)- one of Client #1's medication's label did not match client's Medication Administration Record (MAR).

Maribel Nakamire, RN 11/8/24
Compliance Manager Date

[Signature] 11/8/24
Primary Care Giver Date