

Foster Family Home - Deficiency Report

Provider ID: 1-240026

Home Name: Jovelyn Gasmen, RN

Review ID: 1-240026-4

94-399 Apowale Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 1/13/2025

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 1/13/25).

6.d.1- Client #2's 1147 lapsed on 9/21/24 and no current 1147 present in chart/records.

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;

Comment:

8.(a)(1)- No sex offender search results present for CG#1, CG#2, CG#3, and HHM#3.

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.(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.(b)(8)- CG#3 without a CPR/First Aid and blood borne pathogen and infection control certifications.

41.(c)- CG#3 without evidence of having the required 8 hours of annual in-services training.

Foster Family Home Quality Assurance [11-800-50]

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:

50.(e)(2) Inspection of service sites;

Comment:

50.(e), (e)(2)- CCFFH with a gate at the sidewalk; no gate buzzer/bell present for quick access to the CCFFH.

Foster Family Home - Deficiency Report

Foster Family Home

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;

53.(b)(16) Shall not have dietary restrictions used as punishment; and

Comment:

53.(b)(9), (b)(16)- CCFFH kitchen cabinets/pantries with locks installed and no documentation in clients' service plan allowing caregivers to lock foods/canned goods/snacks for clients' use/consumption.

Foster Family Home

Records

[11-800-54]

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

54.(c)(2)- Client #1's Service Plan dated 9/23/24 without the POA's signature.



Compliance Manager



Primary Care Giver

Date 1/13/25
Date 1/13/25