

Foster Family Home - Deficiency Report

Provider ID: 4-240095

Home Name: Nancy Magsayo, NA

Review ID: 4-240095-1

280 N. Market Street

Reviewer: Terri Van Houten

Wailuku

HI 96793

Begin Date: 12/16/2024

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) – CCFFH inspection conducted for a new 2 bed CCFFH certification. Report issued during CCFFH inspection with written plan of correction due to CTA by 1/16/2025.

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) - CCFFH did not have evidence of a current fingerprint for CG#2.

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) - The CCFFH did not have evidence that CG#1 and CG#²~~1~~ had received confidentiality training.

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Personnel and Staffing

[11-800-41]

- 41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with section 11-800-7.(b)(2).
- 41.(b)(5)(C)(iv) Use of an insured vehicle;
- 41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and
- 41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.
- 41.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

Comment:

41.(b)(4) - The CCFFH did not have evidence of a completed disclosure form for CG#1 and CG#3.

41.(b)(5)(C)(iv) - The CCFFH did not have evidence of a alternate transportation plan.

41.(b)(7) - The CCFFH did not have evidence of an acceptable TB clearance for CG#1. TB clearance was not signed by an MD, PA, or NP. CG#2's TB was completed on the incorrect form.

41.(b)(8) - The CCFFH did not have evidence that CG#3 had completed first aid training.

41.(e) - The CCFFH did not have evidence that CG#3 had been approved as an SCG. CG#3 is a current PCG.

Foster Family Home

Grievance

[11-800-45]

45. The community care foster family home shall have policies and procedures by and through which a client may present grievances about the operation or services of the home. The policies shall include a provision that a client may choose to present any grievance directly to the department of health. The home shall:

Comment:

45. - The CCFFH did not have evidence of a policy and procedure regarding the grievance process.

Foster Family Home

Physical Environment

[11-800-49]

- 49.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;
- 49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;
- 49.(e) The home shall have policies regarding smoking on the property that:
- 49.(e)(1) Prohibit smoking in enclosed living and recreational areas used by clients; and
- 49.(e)(2) Identify designated areas that may be used for purposes of smoking.

Comment:

49.(a)(2) - The CCFFH did not have evidence of grab bars located within reach of the client toilet.

49.(a)(4) - The back exit of the CCFFH has stairs leading to the ground level. No ramp is installed. (Front door has a current wheelchair accessible ramp).

49.(e), 49.(e)(1), 49.(e)(2) - The CCFFH did not have evidence of a policy regarding smoking on the property.

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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:

Comment:

50.(a) - The CCFFH did not have evidence of an emergency management policy and procedure.

Foster Family Home

Insurance Requirements

[11-800-51]

51.(a)(2) Automobile; and

Comment:

51.(a)(2)- The CCFFH did not have evidence of current vehicle insurance.

Foster Family Home

Client Rights

[11-800-53]

53.(a) Written policies and procedures regarding the rights of the client during the client's stay in the home shall be established and a copy shall be provided to the client, or the client's legal representative, and made available to the public when requested.

Comment:

53.(a) - The CCFFH did not have evidence of a current policy concerning visiting hours.

Foster Family Home

Records

[11-800-54]

54.(a)(1) Emergency procedures and an evacuation map;

Comment:

54.(a)(1) - The CCFFH did not have evidence of a current emergency evacuation map.


Compliance Manager


Primary Care Giver

12/16/24
Date

12/16/24
Date