Foster Family Home - Deficiency Report

Provider ID: 4-190008

Home Name: Jovie Jane Rabe, RN Review ID: 4-190008-12

380 Kuualoha Street Reviewer: Terri Van Houten

Kahului HI 96732 Begin Date: 4/10/2025

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 CCFFH inspection for 2 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA by 5/10/2025.

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(3) Inform clients about their confidentiality practices;

Comment:

16.(b)(3) - The CCFFH did not have evidence that client #1/client's representative had been informed of the CCFFH's confidentiality practices.

Foster Family H	me Grievance	[11-800-45]
45.(1)	Inform the client or the client's legal representative of the g in a grievance situation;	rievance policies and procedures and the right to appeal
45.(2)	Provide a written copy of the grievance policies and proced which includes the names and telephone numbers of the ir grievance; and	
45.(3)	Obtain signed acknowledgements from the client or the client procedures were reviewed	ent's legal representative that the grievance policies and

Comment:

45.(1), 45.(2), 45.(3) - The CCFFH did not have evidence that the grievance policy was reviewed with and provided to the client/client's representative for client #1. The client's record did not contain a signed acknowledgement that the policy had been reviewed with them.

Foster Family Home	Client Account	[11-800-48]
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48.(a) The home shall maintain a written accounting of the client's personal funds received and expended on the client's behalf by the home.

Comment:

48.(a) - The CMA paperwork indicated that CG#1 would be responsible for managing client #1's personal needs allowance (PNA). The CCFFH did not have evidence that a written accounting log was being maintained for client #1.

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Foster Fami	ly Home	Client Rights	[11-800-53]	
53.(a)	establis		he rights of the client during the client's stay in the home of the client, or the client's legal representative, and made	
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Comment:

53.(a) - The CCFFH did not have evidence that a copy of the client's rights policy had been provided to the client/client's representative for client #1.

Date

Terri Van Houten, RN

Community Care Foster Family Home (CCFFH) Written Plan of Correction (POC) Chapter 11-800

PCG's Name on CCFFH Certificate: Jovie Jane U. Rabe

(PLEASE PRINT)

CCFFH Address:

380 Kuualoha Street, Kahului, HI 96732

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
16(b)(3) 45. (1) 45. (2) 45. (3) 53. (a)	Client's representative had been informed personally of CCFFH's policies regarding confidentiality, grievances and patient rights. PCG obtained signed acknowledgement from client's representative after reviewing the CCFFH's policies with client's representative. Signed CCFFH's policies was placed into the client's record.	4/28/25	Upon admission, PCG will print out and review CCFFH's confidentiality, grievances and patient rights policies to client or clients representative, will obtain signed acknowledgement and will provide copy of signed policies to client or client's representative. Home will ensure signed CCFFH'S policies is placed into the client's record.
48. (a)	Client's representative signed a new agreement for client's representative to manage client's own personal funds including personal allowance since client's personal need allowances were never been received or managed by PCG since pt was admitted to home.	4/28/25	PCG will verify with client or client's representative upon admission if who will manage client's personal need allowance, and ensure paperwork is done correctly. Home will keep a recording or written accounting log of client's personal allowance into client's file if PCG is assigned to manage client's personal allowance.

All items that were corrected are attached to this POC

PCG's Signature:

Date: 5/2/2025

CTA has reviewed all corrected items