

Foster Family Home - Deficiency Report

Provider ID: 1-561317

Home Name: Eduardo Duquez, CNA

Review ID: 1-561317-17

91-1035 Kaiakua Street

Reviewer: Ryan Nakamura

Ewa Beach HI 96706

Begin Date: 8/14/2025

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 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection. (inspection date: 8/14/2025).

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): No evidence present in CCFFH records of sex offender registry search for CG#1, CG#2, CG#3, and CG#4.

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

41.(a)(2) Be a NA, an LPN, or RN;

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

41.(a)(2): No evidence present in CCFFH records of CNA Prometric registry check for CG#1, CG#2, and CG#3.

41.(b)(7): Evidence present in CCFFH records of lapse of TB clearance for CG#4. TB clearance was due by 9/10/2024 and completed 10/10/2024.

3 Person Staffing 3 Person Staffing Requirements (3P) Staff

(3P)(b)(2) Staff Allowing the primary caregiver to be absent from the CCFFH for no more than twenty-eight hours in a calendar week, not exceed five hours per day; provided that the substitute caregiver is present in the CCFFH during the primary caregiver's absence. Where the primary caregiver is absent from the CCFFH in excess of the hours, the substitute caregiver is mandated to be a Certified Nurse Aide, per 321-483(b)(4)(C)(D) HRS.

Comment:

(3P)(b)(2) Staff: Documentation present in CCFFH records of CG#4, a NA, exceeded 5 hours per day/28 hours per week limit from 6/7/2025 to 6/18/2025. CG#1 was on vacation and CG#4 signed in to substitute. No other CGs signed in during that time frame.

Foster Family Home Fire Safety [11-800-46]

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

Comment:

46.(b)(2): No evidence present in CCFFH records of CG#3 and CG#4 conducted a fire drill in the past year.

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Physical Environment

[11-800-49]

49.(b)(3) Be in close proximity to the primary or substitute caregiver for timely intervention for nighttime needs or emergencies, or be equipped with a call bell, intercom, or monitoring device approved by the case management agency.

Comment:

49.(b)(3): No evidence present in client records of written consent/acknowledgment signed by client/client representative of use of camera/monitor in bedroom/common areas for client #2.

3 Person Physical Environment

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(3P) Env.

(3P)(a)(1) Env. The two clients must consent to share the room

Comment:

(3P)(a)(1) Envi: No documentation of written agreement signed by client/client's representative to live in a shared bedroom for client #2.

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Records

[11-800-54]

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

Comment:


54.(c)(5): Discrepancy noted in client #1's medications for Vitamin B12, Levothyroxine, and Oysco with D. Vitamin B12 dose on hand is 2500mcg but the medication administrative record (MAR) it is listed as 1000mcg. Levothyroxine medication label/physician order is 88mcg 1 tablet PO daily but MAR is listed as 50mcg 1 tablet PO daily. Oysco 500 with D is listed in the MAR but Super B-Complex was being given instead.

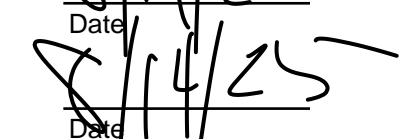
Discrepancies noted in client #3's medication label/physician order compared to MAR for Duloxetine and Senna Plus. Medication label/physician order stated Duloxetine 20mg 2 capsules by mouth daily, but MAR stated 1 capsule by mouth daily. Medication label/physician order for Senna Plus was Take 1 tablet by mouth daily, may give additional 1 tablet daily if needed for no bowel movement for 2 days but MAR stated 1 tablet by mouth two times a day.



Compliance Manager


Primary Care Giver



Date


Date

8/14/2025 12:05:58 PM