

CCFFHs do not have to use samples/examples provided by CTA. However, any CCFFH may use this sample policy/form to comply with current regulations. CCFFHs are not required by CTA to utilize this specific form and may develop their own. CCFFHs may develop their own policies, make their own forms or alter any CTA sample in order to meet their individual business needs.

CTA samples are not written to comply with any legal requirements as they pertain to liability or any other required Federal or State laws or regulations. They are written only to comply with current Hawaii Administrative Rules (HAR) under HAR §11-800 as of October 01, 2021.

CTA provided samples are not inclusive to any other legal needs a CCFFH may have in their operations. It is suggested CCFFHs seek legal consultation for any specific need, particular to their circumstance, to ensure any item is legal and binding and does not violate any federal or state laws.

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Having files set up like this sample Table of Contents will help the PCG during on-site inspections and in meeting all of the HAR requirements.

A common deficiency is finding lapsed or expired items. Any requirement with a due date or expiration date should be renewed no later than the day after. For example, if CPR was done on 4/15/20, a new CPR certificate must be obtained on or before 4/16/22. Plan on scheduling appointments a couple of weeks before expiration date.

TAB 1	<ul style="list-style-type: none"> • General Liability Insurance (Keep last 3 years) • Automobile Insurance Policy Coverage for each person who drives clients showing a minimum of 100,000 bodily injury and 30,000 property damage (Keep last 3 years) OR • One Alternate Transportation Plan for all caregivers who do not drive clients • Substitute Driver Requirements, if using one • Mortgage or Rental Agreement
TAB 2	<ul style="list-style-type: none"> • PCG's Government-Issued Picture Identification • NA Training Certificate (from a State of Hawaii-approved training Program) or CNA certificate, LPN or RN license (keep last 2 in record) • APS and CAN Clearance (Keep 1st two and last 2 done) • Fingerprinting (Keep originals) • State Name Check (eCrim) (keep last 2 in record) • Exemption, if needed for any fingerprint or eCrim in record • PCG Disclosure Form (Keep most recent and up to date one in record) • Tuberculosis Clearance (Keep last 3) • CPR Training (Keep last 2) • First Aid Training (Keep last 2) • Bloodborne Pathogens/Infection Control Training (Keep last 3) • 12 hours of CCFFH Related In-Services Each Year (Keep last 3 years) • Job Experience Form and verification letters, as applicable
TAB 3 (Create for each SCG)	<ul style="list-style-type: none"> • SCG's Government-Issued Picture Identification • NA Training Certificate (from a State of Hawaii-approved training Program) or CNA certificate, LPN or RN license (keep last 2 in record) • APS and CAN Clearance (Keep 1st two and last 2 done) • Fingerprinting (Keep copies of originals) • State Name Check (eCrim) (keep last 2 in record) • Exemption, if needed for any fingerprint or eCrim in record • PCG Disclosure Form (Keep most recent and up to date one in record) • Tuberculosis Clearance or exemption statement (Keep last 3) • CPR Training (Keep last 2) • First Aid Training (Keep last 2) • Bloodborne Pathogens/Infection Control Training (Keep last 3) • SCG Approval Form • Change Notification Form • 8 hours of CCFFH related In-Services each year for 1 or 2 Bed CCFFH (Keep last 3 years) • 12 hours of CCFFH related In-Services each year for a 3 Bed CCFFH (Keep last 3 years) • 3 Bed CCFFH Only — Job Experience Form

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TAB 4 (Create for Each HHM 18 years & Older)	<ul style="list-style-type: none"> • Household Members' Picture Identification • APS and CAN clearance (Keep 1st two and last 2 done) • Fingerprinting (Keep copies of originals) • State Name Check (Ecrim) (Keep last 2 done) • Exemption, if needed for any fingerprint or eCrim in record • Tuberculosis Clearance or exemption statement (Keep last 3)
TAB (Last Tab in Binder OR Put these in Separate Binder)	<ul style="list-style-type: none"> • CCFFH Budget OR Bank Statement page showing ending balance • Monthly Fire Drill Documentation with each SCG conducting a drill at least once a year. Keep all fire drills since last inspection. • CCFFH Provider Policies and Procedures • CCFFH Admission Policy and Agreement that includes CCFFH Rights and Responsibilities, Grievance Policy, Visiting hours, Smoking Policy • Emergency Preparedness Plan • Confidentiality/Privacy Rights Training of SCGs and adult HHM
	<p><u>Additional items to keep if applicable</u></p> <ul style="list-style-type: none"> • 3 Bed CCFFH Sign Out Sheets • Referral, Admission & Discharge Log