<table>
<thead>
<tr>
<th>Foster Family Home</th>
<th>Required Certificate</th>
<th>[11-800-6]</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.(d)(1)</td>
<td>Comply with all applicable requirements in this chapter; and</td>
<td></td>
</tr>
</tbody>
</table>

Comment:

6.d.1 - recertification inspection conducted for this 3 client home. A corrective action report was issued during the visit with a written plan of correction due to CTA no later than 2/10/2020.

<table>
<thead>
<tr>
<th>Foster Family Home</th>
<th>Background Checks</th>
<th>[11-800-8]</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.(a)(1)</td>
<td>Be subject to criminal history record checks in accordance with section 846-2.7, HRS;</td>
<td></td>
</tr>
<tr>
<td>8.(a)(2)</td>
<td>Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and</td>
<td></td>
</tr>
</tbody>
</table>

Comment:

8.a.2 - CG#1 APS/CAN was due by 7/19/19. There is no current APS/CAN in the home binder.

8.a.1, 8.a.2 - CG#2 Has a current APS/CAN/fingerprint result dated 4/8/19 but there are no previous results to confirm check was done on time. eCrim (state name check) is current dated 4/15/19 but there is no previous result on file to confirm check was done on time.

8.a.1, 8.a.2 - CG#3 has an APS/CAN/Fingerprint clearance dated 2/25/19. There is no 2017 or 2019 on file.

<table>
<thead>
<tr>
<th>Foster Family Home</th>
<th>Personnel and Staffing</th>
<th>[11-800-41]</th>
</tr>
</thead>
<tbody>
<tr>
<td>41.(b)(7)</td>
<td>Have a current tuberculosis clearance that meets department guidelines; and</td>
<td></td>
</tr>
</tbody>
</table>

Comment:

41.b.7 - CG#2 has a current TB result dated 10/21/19 on file but there is no previous result to confirm TB was done on time.

41.b.8 - CG#2 has a current CPR/First Aid card dated 11/18/19 on file but there is no previous result to confirm TB was done on time.

<table>
<thead>
<tr>
<th>Foster Family Home</th>
<th>Client Care and Services</th>
<th>[11-800-43]</th>
</tr>
</thead>
<tbody>
<tr>
<td>43.(c)(3)</td>
<td>Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 18-89-100.</td>
<td></td>
</tr>
</tbody>
</table>

Comment:

43.c.3 - There is no RN delegation in client #2s chart for any of the care givers.
<table>
<thead>
<tr>
<th>Foster Family Home</th>
<th>Records</th>
</tr>
</thead>
<tbody>
<tr>
<td>54.(c)(2)</td>
<td>Client's current individual service plan, and when appropriate, a transportation plan approved by the department;</td>
</tr>
<tr>
<td>54.(c)(8)</td>
<td>Personal inventory.</td>
</tr>
</tbody>
</table>

Comment:

54.c.2 - Current service plans for Client 1 and 2 have not been signed by the client/representative.

54.c.8 - Client #3 does not have a personal inventory of belongings in the chart.

Compliance Manager: [Signature]

Date: 1/10/2020

Primary Care Giver: [Signature]

Date: 1/10/2020