

Foster Family Home - Deficiency Report

Provider ID: 1-190099

Home Name: Emma Cabote, RN

Review ID: 1-190099-5

1067 Ala Lili'koi Street

Reviewer: Julie Hastings

Honolulu

HI 96818

Begin Date: 10/1/2021

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

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

Comment:

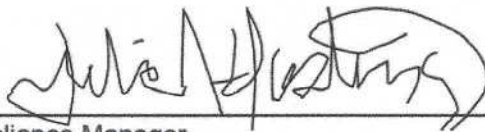
6.(d)(1) - Unannounced home inspection for 2 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 11/04/2021

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:

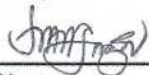
46.(b)(2)
No fire drills for CG#2 or CG#3 in 2020



Compliance Manager

10/01/2021

Date



Primary Care Giver

10/04/2021

Date

CTA RN Compliance Manager: Julie Hastings

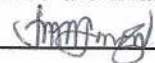
Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate: EMMA CABOTE
(PLEASE PRINT)

CCFFH Address: 1067 AHA ULUKOI ST., HONOLULU, HI 96815
(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?
46.(b)(2)	Review Fire Drills Policy with Substitute Caregivers #1 & #2. Discussed with ■ CG #1 & 2 to rotate the conduct of Monthly Fire Drills.	10/6/21	I made a quarterly rotation of schedule for PCG and two ■ CG's to lead the monthly fire drills. I posted the schedule on our Bulletin Board to set as a reminder.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10/7/21

CTA has reviewed all corrected items