

Foster Family Home - Deficiency Report

Provider ID: 2-559726

Home Name: Ludivina Eder, CNA

Review ID: 2-559726-10

147 W. Kinai Place

Reviewer: David Ayling

Hilo HI 96720

Begin Date: 9/15/2021

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

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

Comment:

6.(d)(1) - Home inspection for a 3 person CCFFH recertification. Corrective Action Report issued during home inspection with written plan of correction due to CTA by 10/15/21.

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;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1)(2) - APS/CAN and/or Criminal history have expired for all CG's. CG #1, CG #2, CG #3, and CG #4 have expired APS/CAN and Criminal histories. Expired on 8/13/2021. APS/CAN and Criminal history for CG #4 expired on 8/15/2019. Not done until 11/6/2019.

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:


41.(b)(8) - Not current CPR/First Aid certification for CG #3. Expired June 2020.


3 Person Fire Safety, Natural Disaster 3 Person Fire Safety (3P) Fire

(3P)(b)(6) Fire shall include all SCGs at least once per year


Comment:

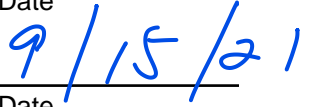
(3P)(b)(6) Fire - All CG's have not lead a fire drill since 12/2020.



Compliance Manager


Primary Care Giver



Date


Date