

# Foster Family Home - Deficiency Report

Provider ID: 1-525214

Home Name: Rosario Nivera, RN

Review ID: 1-525214-9

920 Laki Road

Reviewer: Julie Hastings

Honolulu

HI 96817

Begin Date: 9/17/2021

## 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 completed for a 3 person CCFFH recertification.

- Home inspection completed for a 3 person CCFFH recertification  
Corrective Action Report issued during home inspection with all approved written corrections due to CTA by 10/17/2021

## Foster Family Home

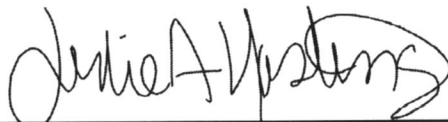
## Background Checks

[11-800-8]

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

Comment:

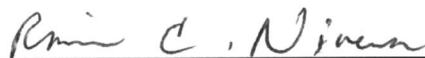
8.(a)(2)  
CG#3 APS/CAN lapsed was done 12/11/18. Was due on or before 12/11/20. Was done again 12/28/2020



Compliance Manager

9/17/2021

Date



Primary Care Giver

9/17/2021

Date

CTA RN Compliance Manager: Terri Van Houten, RN/ Julie Hastings, RN

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

PCG's Name on CCFFH Certificate: Rosario C. Nivera  
(PLEASE PRINT)

CCFFH Address: 920 Laki Road Honolulu, HI 96817  
(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?
8.a.2	Lapse cannot be corrected	9/17/2021	Home will use a digital calendar on all due dates on background checks at least 8 weeks before due dates to prevent future lapses.

All items that were fixed are attached to this CAP

PCG's Signature: Rosario C. Nivera

Date: 9/17/2021

CTA has reviewed all corrected items