

Foster Family Home - Deficiency Report

Provider ID: 1-562878

Home Name: Fe Dumlao, CNA

Review ID: 1-562878-11

91-865 Hamiha Place

Reviewer: Jackie Chamberlain

Ewa Beach

HI 96706

Begin Date: 10/13/2021

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

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

Comment:

6(d)(1) CCFFH inspection made for a 3 bed annual inspection.

Deficiency Report issued during CCFFH inspection with corrective action plan due to [REDACTED] within 30 days of inspection.

Foster Family Home Physical Environment [11-800-49]

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

Comment:

49.(a)(4) Per My Choice My way clients to have open access to the kitchen. There is no wheelchair access to the kitchen or common living room due to a baby gate and furniture / items blocking pathway

Foster Family Home Quality Assurance [11-800-50]

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

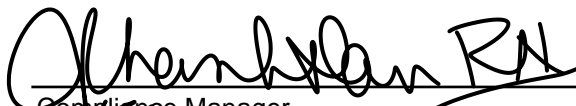

50(e) The CCFFH has a gate at the sidewalk that lacks a communication method to the CCFFH for quick access into the CCFFH.

Foster Family Home Client Rights [11-800-53]

53.(b)(15) Have daily visiting hours and provisions for privacy established;

Comment:

53.(b)(15) visiting hours state limited hours. Per "My choice my way" visiting hours cannot be restricted.


Compliance Manager

Primary Care Giver

10/13/21
Date
10/13/21
Date