

# Foster Family Home - Deficiency Report

Provider ID: 1-513235

Home Name: Hedidia Agbulos, CNA

Review ID: 1-513235-11

99-322 Ahe Ahe Street

Reviewer: Maribel Nakamine

Aiea HI 96701

Begin Date: 10/14/2021

## 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 recertification inspection conducted.

Deficiency Report issued during CCFFH inspection with a written plan of correction due [REDACTED] on 11/14/2021.

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

(3P)(b)(1) Fire shall be conducted monthly

Comment:

(3P)(b)(1)Fire- No monthly fire drill records present for the past 12 months.

## 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)- Front door entrance/exit was obstructed with multiple household items on the outside preventing a safe pathway in the event of an emergency/evacuation.

## 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.

*Maribel Nakamine, RN* 10/14/21

Compliance Manager

Date

*[Signature]*

Date

10/14/21