

Foster Family Home - Deficiency Report

Provider ID: 1-562381

Home Name: Eugene Ganir, CNA

Review ID: 1-562381-9

99-278 Ohenana Loop

Reviewer: Maribel Nakamine

Aiea HI 96701

Begin Date: 11/22/2021

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 to CTA on 12/22/2021.

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)- CG#3's APS/CAN lapsed on 1/24/2021 and renewed on 2/1/2021; Ecrim lapsed on 7/22/2020 and renewed on 11/20/2020.

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- CG#2's last monthly fire drill conducted was on 6/1/2020 none for year 2021; CG#4 without a monthly fire drill conducted for years 2020 and 2021.

Maribel Nakamine, RM 11/22/2021
Compliance Manager Date
Eugene Ganir 11/22/2021
Primary Care Giver Date