

Foster Family Home - Deficiency Report

Provider ID: 2-160026

Home Name: Dy Elma Akiyama, CNA

Review ID: 2-160026-10

124 Alaloa Road

Reviewer: Terri Van Houten

Hilo HI 96720

Begin Date: 2/24/2022

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

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

Comment:

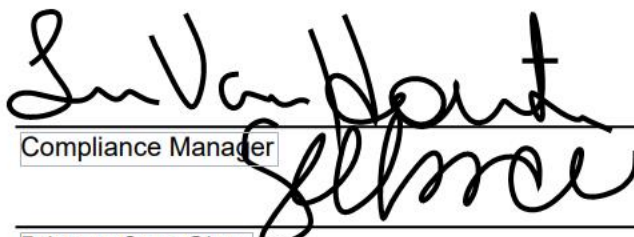
6.(d)(1) - Unannounced annual home inspection for 3 bed CCFFH. Report issued during home inspection with written plan of correction due to CTA by 3/26/2022.

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 - CCFFH did not have evidence that CG#5, CG#6, or CG#7 have conducted a fire drill within the last 12 months.



Compliance Manager

Primary Care Giver

2/24/22

Date
2/24/22

Date