

Foster Family Home - Deficiency Report

Provider ID: 1-210080

Home Name: Juliet Calantoc, NA

Review ID: 1-210080-1

99-1357 Palaialii Place

Reviewer: David Ayling

Aiea HI 96701

Begin Date: 1/3/2022

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Home inspection for a new 2 person CCFFH certification. Corrective Action Report issued during home inspection with written plan of correction due to CTA by 1/13/22.

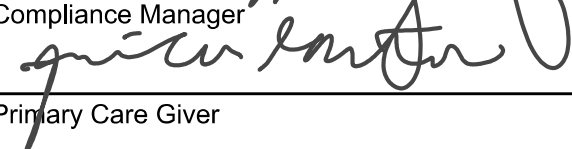
Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(8) - No current CPR/First Aid and Blood Borne Pathogen certification for CG #3.


Compliance Manager


Primary Care Giver


Date


Date