

# Foster Family Home - Deficiency Report

Provider ID: 1-581779

Home Name: Karen Asuncion, CNA

Review ID: 1-581779-10

1815 Akina Street

Reviewer: Adrienne Kolo

Honolulu

HI 96819

Begin Date: 2/18/2022

## 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 home inspection for 3 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 3/18/2022.

## 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;

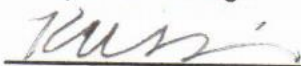
8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

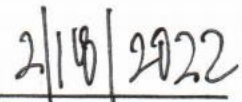
8.(a)(1) (2) Be subject to criminal history record checks in accordance with section 846-2.7, HRS  
CG#1 - Expired APS/CAN/Fingerprint on 12/18/2021. Renewal was done on 1/12/2022.  
CG#3 - Expired Ecrim on 7/4/2020. Renewal was on 7/22/2020.



Compliance Manager



Primary Care Giver



Date



Date

CTA RN Compliance Manager: Adrienne A. Kolo, RN

Community Care Foster Family Home (CCFFH)  
Written Corrective Action Plan (CAP)  
Chapter 11-800

PCG's Name on CCFFH Certificate: Karen Asuncion

CCFFH Address: 1815 Alaina Street Honolulu HI 96819  
(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8a(1)	<u>CG#1</u> Expired APS/CAN / FINGERPRINT ON 12/18/21	11/2/2022	I will place a reminder of when my credentials expire on my wall or where I can see it.
(2)	RENEWAL WAS ON 01/12/2022		
	<u>CG#3</u> Expired Exam on 7/14/2020 Renewal on 7/22/2020	7/22/2020	

All items that were fixed are attached to this CAP

PCG's Signature: [Signature]

Date: 2/8/2022

CTA has reviewed all corrected items