

Foster Family Home - Deficiency Report

Provider ID: 1-589682

Home Name: Cecilia Supnet, NA

Review ID: 1-589682-4

94-1174 Heahea Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 8/15/2022

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 inspection made for a 3-bed recertification. Corrective action report issued during inspection with Plan of Correction due to CTA on 9/15/2022. (30 days from the date the CCFFH is given their deficiency report).

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 and 8.a.2. HHM#1 did not meet the APC CAN Fingerprints two set requirements within 12 months. First set was completed on 11/25/2019 and second set was completed on 11/29/2021.

Foster Family Home Quality Assurance [11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.a. Emergency Preparedness Plan was not completed. All CGs did not receive the training.

Compliance Manager

Primary Care Giver

Date

Date