

Foster Family Home - Deficiency Report

Provider ID: 3-527210

Home Name: Florie Domingo, NA

Review ID: 3-527210-13

73-4334 Napoo Place

Reviewer: David Ayling

Kona HI 96740

Begin Date: 9/6/2022

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

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

Comment:

6.(d)(1) - Annual unannounced inspection made today. Corrective Action Report issued during home inspection with written plan of correction due to CTA by 10/6/22.

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) - APS/CAN expired on 8/31/2022 for CG #1. CG #5 needs 2nd year APS/CAN/Fingerprints. Expired on 2/8/2022.

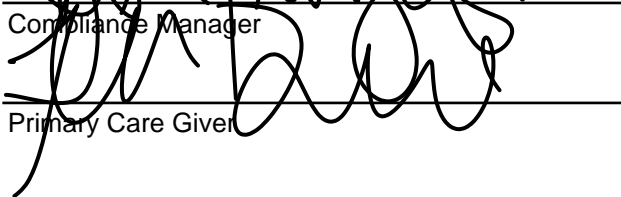
Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

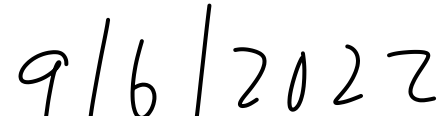
Comment:

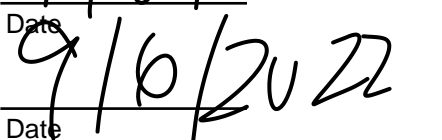
41.(b)(8) - CG #1 and CG #5 need current Blood Borne Pathogen certification. Expired on 7/1/2022. CPR/First Aid expired on 8/14/2022 for CG #1.



Compliance Manager


Primary Care Giver



Date


Date