

Foster Family Home - Deficiency Report

Provider ID: 3-559982

Home Name: Princess Joy Domingo, CNA

Review ID: 3-559982-12

73-1340 Kaiminani Drive

Reviewer: David Ayling

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

Comment:

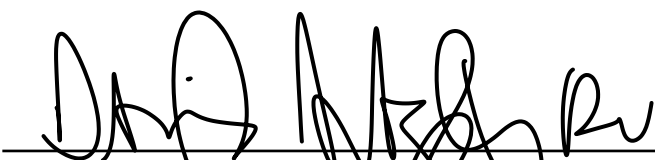
8.(a)(2) - APS/CAN expired on 8/18/2022 for CG #3.

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:

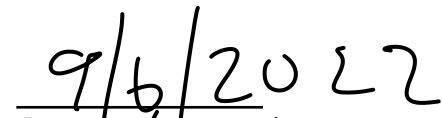
41.(b)(8) - CPR expired on 2/28/2022 for CG #3.




Compliance Manager



Primary Care Giver



Date



Date