Foster Family Home - Deficiency Report				
Provider ID:	4-120064			
Home Name:	Roman Queja, CNA		Review ID:	4-120064-13
58 East Kauai Street			Reviewer:	Terri Van Houten
Kahului	HI	96732	Begin Date:	7/26/2022
Foster Family Home Required Certific		cate	[11-800-6]	
6.(d)(1) Comply with all applicable requirements in this chapter; and				
Comment:				
6.(d)(1) - Unannounced annual inspection for 3 bed CCFFH. Report issued during CCFFH inspection with written plan of correction due to CTA by 8/26/2022.				
Foster Family Home		Personnel and Staffing		[11-800-41]
41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and				
Comment:				
41.(f)(1)-CG#3 did not have a current TB clearance on file. TB clearance expired 3/8/22.				
3 Person Staffing		3 Person Staffing Requirements		(3P) Staff
(3P)(a)(4) Staff	A current Certified Nurses Aide or Nurse Aide certificate plus one year of experience in a home setting. If the certificate is expiring within the next 30 days, evidence of a new certificate must be provided. Substitute caregivers have a minimum of one year work experience as a caregiver in a community residential setting or in a medical facility, per 321-483(b)(4)(E) HRS.			
Comment:				

(3P)(a)(4) Staff - CG#3 did not have a current CNA certification on file

Compliance Manager I Primary Care Giver

72 Date 120122 <u>ר</u>

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