

Foster Family Home - Deficiency Report

Provider ID: 1-170099

Home Name: Daisy Cablayan, CNA

Review ID: 1-170099-10

1828 Kamehameha IV Road

Reviewer: Jackie Chamberlain

Honolulu

HI 96819

Begin Date: 11/21/2022

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

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

Comment:

6(d)(1) CCFFH inspection made for a 3 bed re-certification.

Deficiency Report issued during CCFFH inspection with plan of correction required, due to CTA within 30 days of inspection.

Foster Family Home Physical Environment [11-800-49]

49.(d)(1) The certificate holder shall ensure that the minimum physical environment requirements as specified in this section are met; and

Comment:


49.(d)(1) A shared bedroom for client 2 and 3 also has the CCFFH records in a bureau dresser that is taking available space away from client 3

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

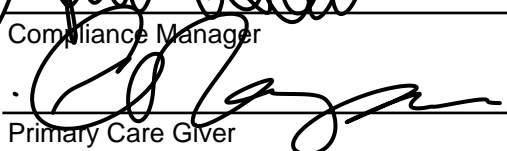
50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

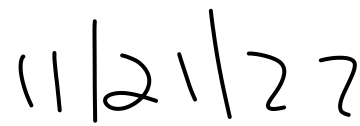
50(e) The CCFFH has a gate at the sidewalk that lacks a communication method to the CCFFH for quick access into the CCFFH.



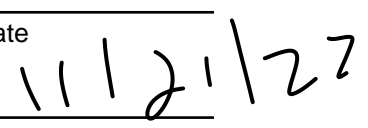
Compliance Manager



Primary Care Giver



Date



Date

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

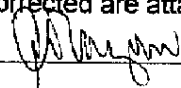
**Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800**

PCG's Name on CCFFH Certificate: Daisy Cablayan
(PLEASE PRINT)

CCFFH Address: 1828 Kam IV RD Hon 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?
49 (d)(i)	I moved the dresser cabinet to an area in the house other than their bedroom that limit clients space	12/1/22	I will ensure that clients stuff are the only stuff in their bedrooms to give them more space & privacy

All items that were corrected are attached to this POC

PCG's Signature: 

Date: 12/1/22

CTA has reviewed all corrected items

BEFORE & AFTER PICTURE ATTACHED

CTA RN Compliance Manager: Send to Terri Van Houten RN / Jackie Chamberlain RN

**Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800**

PCG's Name on CCFFH Certificate: DAISY CABLAYAN
(PLEASE PRINT)

CCFFH Address: 1828 Kam IV RD Hon 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?
50(e)	CALL BELL WAS PLACED TO THE GATE TO GIVE QUICK ACCESS TO VISITORS COMING TO CCFFH	12/1/22	I WILL ENSURE THAT CALL BELL IS WORKING AT ALL TIMES FOR VISITORS QUICK ACCESS

All items that were corrected are attached to this POC

PCG's Signature: *Daisy Cablayan*

Date: 12/1/22

CTA has reviewed all corrected items