

Foster Family Home - Deficiency Report

Provider ID: 1-210005

Home Name: Josephine De Vera, NA

Review ID: 1-210005-5

91-154 Hailipo Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 11/7/2022

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 2-bed recertification. Corrective action report issued during inspection with Plan of Correction due to CTA on 12/07/2022. (30 days from the date the CCFFH is given their deficiency report).


Foster Family Home Fire Safety [11-800-46]

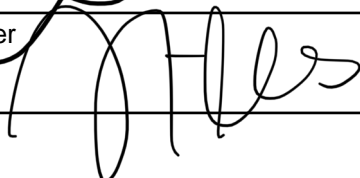
46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.a. And 46.b.2. CG# 2 and #3 have not conducted a fire drill in the past 12 months.



Compliance Manager


Primary Care Giver

11/7/22

Date
11/7/22

Date