

Foster Family Home - Deficiency Report

Provider ID: 1-578859

Home Name: Florentina Nunez, CNA

Review ID: 1-578859-12

98-022 Kuleana Place

Reviewer: Maribel Nakamine

Pearl City HI 96782

Begin Date: 4/28/2023

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 visit made for a 3-bed annual inspection.

Deficiency Report issued during CCFFH inspection with Plan of Correction due to CTA within 30 days of inspection (issued on 4/28/23).

3 Person Staffing 3 Person Staffing Requirements (3P) Staff

(3P)(b)(2) Staff Allowing the primary caregiver to be absent from the CCFFH for no more than twenty-eight hours in a calendar week, not exceed five hours per day; provided that the substitute caregiver is present in the CCFFH during the primary caregiver's absence. Where the primary caregiver is absent from the CCFFH in excess of the hours, the substitute caregiver is mandated to be a Certified Nurse Aide, per 321-483(b)(4)(C)(D) HRS.

Comment:


(3P)(b)(2)Staff- No evidence that a Sign In/Out Sheet form was being utilized and or maintained.

3 Person Fire Safety, Natural Disaster 3 Person Fire Safety (3P) Fire

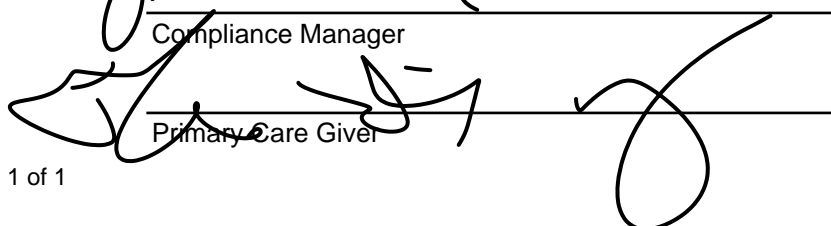
(3P)(b)(1) Fire shall be conducted monthly

Comment:

(3P)(b)(1)Fire- Last monthly fire drill was on 2/12/23. No fire drill conducted for 3/2023.



Compliance Manager
Date 4/28/23



Primary Care Giver
Date 4/28/23