Foster Family Home - Deficiency Report								
Provider ID:	1-12003	86						
Home Name:	Helen	Balila, C	NA	Review ID:	1-120036-1	7		
4019 Maunaloa A	Avenue			Reviewer:	Po Lim			
Honolulu		HI	96816	Begin Date:	3/2/2023			
Foster Family	Home	R	equired Certif	icate		[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 re-certification inspection.								
Deficiency Report issued during CCFFH inspection via email on 3/2/2023 with Plan of Correction due to CTA within 30 days of inspection date of 3/2/2023.								
Foster Family	Home	Ba	ackground Ch	iecks	l	[11-800-8]		
8.(a)(1)	Be su	bject to	criminal history	record checks in acc	ordance with	section 846-2.7, HRS;		
8.(a)(2)	Be su	bject to	adult protective	service perpetrator of	checks if the in	dividual has direct contact with a client; and		
Comment:								
8.a.1.and 8.a.2 period.	. HHM	#2 and	HHM #3 did n	ot meet the 2 sets	of APS, CAN	I, Fingerprints requirements within a 12 months		
Foster Family	Home	In	formation Co	ofidentiality		[11-800-16]		
16.(b)(5)			ng to all employe nd client privacy	riahts.		the home, on their confidentiality policies and		

Comment:

16.b.5 No confidentiality/privacy training present for CG#2, CG#3, HHM #2, and HHM #3.

## Foster Family Home - Deficiency Report

Foster Family	Home Personnel and Staffing	[11-800-41]	
41.(b)(5)(A)	When the caregiver does not have a valid driver's I written alternative transportation plan shall be subn	cense, does not have access to an insured vehicle, or hitted to the department for approval;	r both, a
41.(b)(8)	Have documentation of current training in blood bo resuscitation, and basic first aid.	ne pathogen and infection control, cardiopulmonary	
41.(c)	training annually which shall be approved by the de	d the substitute caregiver shall attend eight hours, of i partment as pertinent to the management and care of n of training received by all caregivers, in the caregive	f clients.
Comment:			

41.(b)(8) CCFFH did not have evidence of current Bloodborne Pathogen/Infection control training for CG# 1. It was due on/before 02/11/2023.

41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG# 1 and CG#3. CG# 3 requires 12 hours of in-service training, but had only 9 hours attended in 2022-2023. No annual in-service training hours for CG# 1 for 2022-2023 present in record. CG# X was required to have 12 hours in 2022-2023.

41.b.5.a CG#2 and CG#3 does not drive clients. No alternate transportation plan present in record.



Date Date