

Foster Family Home - Deficiency Report

Provider ID: 1-200020

Home Name: Lovi Valencia, CNA

Review ID: 1-200020-7

94-369 Kahuapaa Place

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 1/27/2023

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Deficiency Report issued during CCFFH inspection via email on 1/27/2023 with Plan of Correction due to CTA within 30 days of inspection date of 1/27/2023.

3 Person Staffing	3 Person Staffing Requirements	(3P) Staff
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(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) No evidence that a 3-bed sign out sheet was in use at the CCFFH.

3 Person Fire Safety, Natural Disaster	3 Person Fire Safety	(3P) Fire
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(3P)(b)(1) Fire shall be conducted monthly

(3P)(b)(2) Fire shall be held at different times of the day, evening, and night

(3P)(b)(4) Fire shall include testing of smoke detectors

(3P)(b)(6) Fire shall include all SCGs at least once per year

Comment:

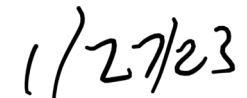
(3P)(b)(1)(2)(4)(6) The CCFFH did not have evidence that fire drills had been conducted monthly since 7/2022 and were being held at different times of the day, evening, and night/included testing of the smoke detectors/included each CG at least once per year.

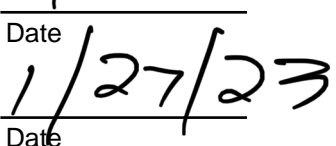
CG #2 did not conduct a fire drill in the past 12 months.



Compliance Manager


Primary Care Giver



Date


Date