

Foster Family Home - Deficiency Report

Provider ID: 4-510835

Home Name: Norma Ragasa, CNA

Review ID: 4-510835-11

156 Kealohilani Street

Reviewer: Terri Van Houten

Kahului HI 96732

Begin Date: 2/16/2023

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 annual inspection for 3 bed CCFFH. Report issued during CCFFH inspection with written plan of correction due to CTA by 3/16/2023.

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.

Comment:



46.(a) - CCFFH did not have evidence that fire drills were being conducted monthly. CCFFH did not have records for fire drills conducted in June 2022, July 2022, and January 2023.

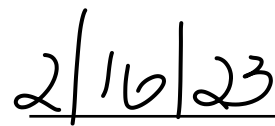
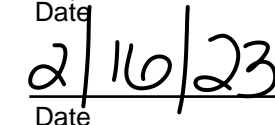
Foster Family Home Insurance Requirements [11-800-51]

51.(a)(1) General;

Comment:

51.(a)(1) - Lapse in CCFFH liability insurance. Certificate expired 11/30/22 and CG was unable to locate the renewed policy statement.


Compliance Manager

Primary Care Giver


Date

Date