

# Foster Family Home - Deficiency Report

Provider ID: 1-631293

Home Name: Melanie Ramiro, CNA

Review ID: 1-631293-11

94-1116 Huakai Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 6/28/2022

## 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 annual inspection completed.

Deficiency Report issued during CCFFH inspection with a written plan of correction due to CTA on 7/28/22.

## Foster Family Home Background Checks [11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- C ■■■s APS/CAN/Fingerprint lapsed on ■■■■ and no current result was present.

## Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

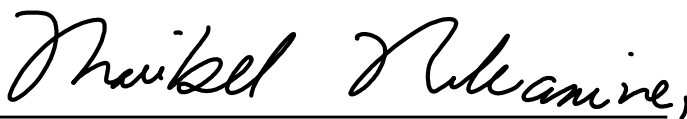
41.(b)(7)- CG#1, CG#2, and CG#3's TB clearances lapsed on ■■■■; CG#4's lapsed on ■■■■. All were without current TB clearances present.

## Foster Family Home Client Care and Services [11-800-43]

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

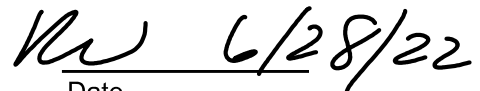
43.(c)(3)- No RN delegations present for C ■■■ in Client ■■■ chart.



Compliance Manager



Primary Care Giver

 6/28/22

Date

 6/28/22

Date

CTA RN Compliance Manager: Maribel Nakaine

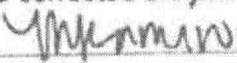
Community Care Foster Family Home (CCFFH)  
Written Plan of Correction (POC)  
Chapter 11-800

PCG's Name on CCFFH Certificate: Melanie Ramiro  
(PLEASE PRINT)

CCFFH Address: 94-1116 Huakai St. Waipahu HI 96797  
(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.a 1 8.a 2	CG#4 fingerprint obtained	6/29/2022 6/29/2022	Home will use a wall calendar to put all due dates on and will make sure background checks will be done at least 1-2 months before due date to prevent future lapses. CG#4 will inform when an item is 1-2 months before it is due.
41.b7	TB clearance was obtained for CG#1, CG#2, CG#3 and CG#4. It was place into home record.	6/29/2022	Home will use a spreadsheet to identify when requirements are due to prevent them from expiring. CG#1, CG#2, Cg#3 and CG#4 will inform when an item is due 3-4 wekks before it is due.
43.c3	RN Delegation was done for CG#4 in clients #1 chart.	6/29/2022	Home will notify client's CMA that RN delegation needs to be done within 1-2 days of a caregiver being added to the home.

All items that were corrected are attached to this POC

PCG's Signature: 

6/29/22

CTA has reviewed all corrected items