

Foster Family Home - Deficiency Report

Provider ID: 2-170053

Home Name: Elizabeth Lim, CNA

Review ID: 2-170053-12

267 Chong Street

Reviewer: David Ayling

Hilo HI 96720

Begin Date: 6/13/2023

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

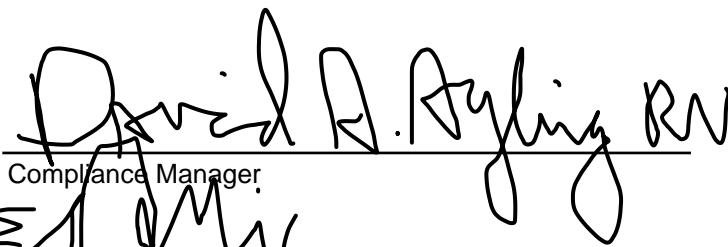
6.(d)(1) - Home inspection for a 2 person CCFFH recertification. Deficiency Report issued during home inspection with written plan of correction due to CTA by 7/13/23.

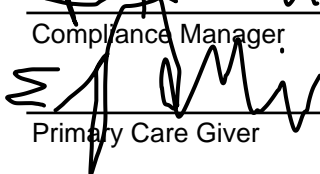
Foster Family Home Background Checks [11-800-8]

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

Comment:

8.(a)(2) - No current APS/CAN for CG #3. Expired on 10/9/2022.



Compliance Manager


Primary Care Giver

6/13/2023
Date
6/13/23
Date
6/13/2023 10:44:15 AM