## Foster Family Home - Deficiency Report

Provider ID: 1-594673

Home Name: Divina Mapanao, CNA Review ID: 1-594673-16

91-1643 Auwaha Street Reviewer: Ryan Nakamua

Ewa Beach HI 96706 Begin Date: 11/27/2023

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 CCFFH inspection for 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days after inspection (inspection date:11/27/2023).

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;

Comment:

8.(a)(2): Evidence by CCFFH of lapse of ecrim clearance for CG#1, CG#2, and CG#3. Documents provided by CCFFH show lapse from 2/17/2023 to 8/31/2023.

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and

procedures and client privacy rights.

Comment:

16.(b)(5): No evidence by CCFFH of CG#2, CG#3, and CG#4 receiving confidentiality training. No documentation provided by CCFFH.

Foster Family Home	Personnel and Staffing	[11-800-41]	
	e non-medical transportation through p , or an alternative approved by the de	possession of a valid Hawaii driver's license and acces	ss to an insured
41.(b)(7) Have a	current tuberculosis clearance that m	neets department guidelines; and	
	ocumentation of current training in blotation, and basic first aid.	ood borne pathogen and infection control, cardiopulmo	onary
Comment:			

41.(b)(5): No evidence by CCFFH of alternate transportation plan for CG#4. No documents provided by CCFFH.

41.(b)(7): Evidence by CCFFH of lapse in TB clearance for CG#3. Documents provided by CCFFH show lapse from 4/2/2023 to 10/15/2023.

41.(b)(8): No evidence by CCFFH of current training completed for First Aid/CPR for CG#4. Documents provided by CCFFH show First Aid/CPR expired in 3/2023.

## Foster Family Home - Deficiency Report

Foster Family	Home	Physical Environment	[11-800-49]				
49.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;							
Comment:							

49.(a)(2): No grab bar for area near client bathroom toilet.

Primary Care Given

Page 2 of 2

1/27/23 Date 21/23

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