

# Foster Family Home - Deficiency Report

Provider ID: 4-180014

Home Name: Evelyn Queja, CNA

Review ID: 4-180014-12

61 Kaiemi Street

Reviewer: Terri Van Houten

Kahului HI 96732

Begin Date: 1/9/2024

## 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 2 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA by 2/9/2024.

42. CCFFH did not have evidence of an 1147 for client #1 and client #2. Client #1's 1147 expired 3/2023. Client #2 did not have an 1147 on file.

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

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:


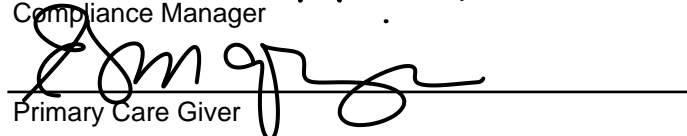
41.(f)(1) - Three (3) minor children residing in the CCFFH did not have evidence of TB clearance or TB exemption.



## 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 a fire drill was being completed monthly. No evidence of fire drills completed from July 2023 through October 2023.

  
Compliance Manager  
  
Primary Care Giver

  
Date  
  
Date