

Foster Family Home - Deficiency Report

Provider ID: 2-619273

Home Name: Rowena Visaya, CNA

Review ID: 2-619273-15

15-1518 25th Avenue

Reviewer: David Ayling

Keaau

HI

96749

Begin Date: 1/3/2024

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

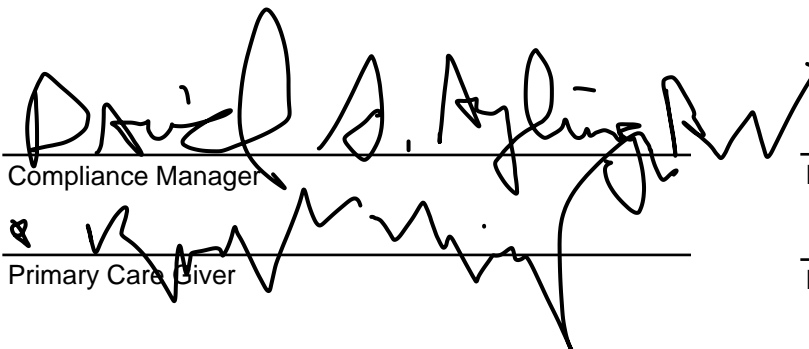
6.(d)(1) - Annual unannounced inspection made today. Deficiency Report issued during home inspection with written plan of correction due to CTA by 2/3/24.

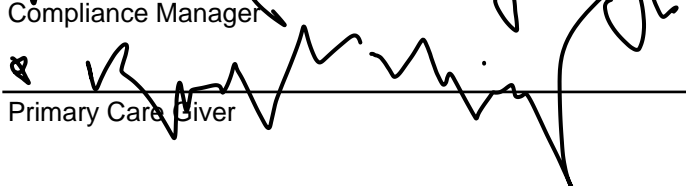
Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41.(c) - CCFFH did not have evidence of required number of hours (8 hours) of in-service training per calendar year 2023 for CG #2 and CG #3. CG #2 and CG #3 had no hours for calendar year 2023.


Compliance Manager


Primary Caregiver

Date

Date

1/3/2024
1-3-2024

CTA RN Compliance Manager: David Ayling, RN

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

PCG's Name on CCFFH Certificate: ROWENA C. VISAYA

CCFFH Address: 15-1518 25th Ave HPP Keanu H. 96749
(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?
41.(c)	Cant go back	01/03/24	I will put a reminder in my Iphone calendar to have all CG's to obtain inservice training

☒ All items that were corrected are attached to this POC

PCG's Signature: Rowena Visaya

Date: 01/03/2024

☒ CTA has reviewed all corrected items