Foster Family Home - Deficiency Report

Provider ID: 1-578859

Home Name: Florentina Nunez, CNA Review ID: 1-578859-14

98-022 Kuleana Place Reviewer: Ryan Nakamua

Pearl City HI 96782 Begin Date: 3/15/2024

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 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 3/15/2024).

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary

resuscitation, and basic first aid.

Comment:

41.(b)(8): No evidence by CCFFH of current first aid training completed for CG#3. Documents provided by CCFFH show that CG#4 was due by 10/22/2023.

Foster Family Home Client Rights [11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including

privacy in treatment and in care of the client's personal needs;

Comment:

Page 1 of 1

53.(b)(9): Camera operating in common living area and dining area. No written consent or acknowledgement of use of camera from all clients or responsible parties.

Compliance Manager

Primary Care Giver

Date Date 2/15/2024 11:1

/3/15/2024 11:15:10 AM