Foster Family Home - Deficiency Report

Provider ID: 2-636102

Home Name: Leonora Agbigay, CNA Review ID: 2-636102-11

293 Kuhilani Street Reviewer: David Ayling

Hilo HI 96720 Begin Date: 3/14/2024

Foster Family Home	Required Certificate	[11-800-6]
roster railing Home	Required Certificate	1-000-0

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

Background Checks

Comment:

Foster Family Home

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 4/14/24.

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8.(a)(1)	Be subject to criminal history record	d checks in accordance with sectio	n 846-2.7, HRS;	
8.(a)(2)	Be subject to adult protective servi	ce perpetrator checks if the individu	ual has direct contact with a client; and	d
Comment:				

[11-800-8]

8.(a)(1)(2) - APS/CAN and eCrim expired on 7/13/2022 for CG #1, CG #4, and HHM #1. Not done until 11/15/2022.

Foster Family H	lome Personnel and Staffing	[11-800-41]
41.(b)(7)	Have a current tuberculosis clearance that meets de	partment guidelines; and
41.(b)(8)	Have documentation of current training in blood borr resuscitation, and basic first aid.	ne pathogen and infection control, cardiopulmonary
41.(c)	training annually which shall be approved by the dep	If the substitute caregiver shall attend eight hours, of in-service partment as pertinent to the management and care of clients. of training received by all caregivers, in the caregiver file in the

Comment:

41.(b)(7) - TB clearance expired on 6/6/2023 for CG #4. No current TB clearance in ccffh binder.

41.(b)(8) - First Aid certification expired on 2/15/2024 for CG #3.

41.(c) - Only 4 hours of In-Service training in 2022 and no hours in 2023 for CG #1.

Foster Family Ho	ome Client Rights	[11-800-53]	
53.(b)(11)	Have the right to associate and communicate privately personal mail and items unopened;	y with persons of the client's choice, an	d to send and receive
Comment:			

53.(b)(11) - Locks on client's door don't have a way for CGs to unlock doors. (My Choice My Way)

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Foster Family Ho	ome	Records	[11-800-54]
54.(c)(5)	Medication	n schedule checklist;	
Comment:			

54.(c)(5) - No charting of all medications for client #1 since 3/10/2024.

Service Manager

Flower Trimary Care Giver

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