

Foster Family Home - Deficiency Report

Provider ID: 1-220051

Home Name: Imelda Landingin, CNA

Review ID: 1-220051-5

95-276 Waiiala Street

Reviewer: Maribel Nakamine

Mililani

HI 96789

Begin Date: 4/1/2024

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 visit made for a 2-bed recertification inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days (issued on 4/1/24).

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;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- CG#7 and HHM#3's APS/CAN/Fingerprint results lapsed on 6/22/23 and no current results were present.

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

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

41.(b)(7)- CG#7's TB clearance lapsed on 6/16/23 and no current result was present.

Foster Family Home Quality Assurance [11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a)- CG#7 without evidence of having been trained with the CCFFH's Emergency Preparedness Plan.

Compliance Manager

Date

Primary Care Giver

Date

CTA RN Compliance Manager: Maribel Nakamine, RN

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

PCG's Name on CCFFH Certificate: Imelda Landingin
(PLEASE PRINT)

CCFFH Address: 95-276 waiala st.mililani HI. 96789
(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?
8.(a) (1)	Lapse cannot be corrected.	4/15/24	Home will use a wall calendar to put all due dates to prevent future lapses.
8.(a) (2)	Lapse cannot be corrected.	4/15/24	Home will use a wall calendar to put all due dates to prevent future lapses.
41.(b) (7)	CG#7 Obtained a current TB clearance: Document was filed in home binder.	4/16/24	CG#7 will use a Samsung cell phone calendar to schedule due dates, 1 month in advance to prevent future lapses.
50.(a)	CG#7 was trained and signed the CCFFH's Emergency Preparedness Plan. Filed in the home binder.	4/8/23	CG#7 [REDACTED] signed. Maribel Nakamine, RN, overlooked the signature.

All items that were corrected are attached to this POC

PCG's Signature: Imelda Landingin

Date: 05/01/2024

CTA has reviewed all corrected items