

Foster Family Home - Deficiency Report

Provider ID: 1-230058

Home Name: Maxima Ganal, CNA

Review ID: 1-230058-3

98-128 Kaluamoi Place

Reviewer: Ryan Nakamua

Pearl City HI 96782

Begin Date: 5/2/2024

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 within 30 days of inspection (inspection date: 5/2/2024).

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;

Comment:

8.(a)(1): No documentation provided by CCFFH of any sets of fingerprints for CG#2 for criminal background check.

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 documentation of current first aid training completed by CG#1. Only CPR/AED certificate provided.



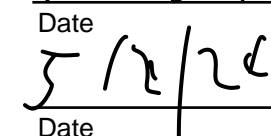
Compliance Manager



Primary Care Giver



Date



Date