

Foster Family Home - Deficiency Report

Provider ID: 1-090104

Home Name: Josephine Gamiao, NA

Review ID: 1-090104-17

91-1082-A Kauiki Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 7/8/2024

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 re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 7/8/2024 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home Background Checks [11-800-8]


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

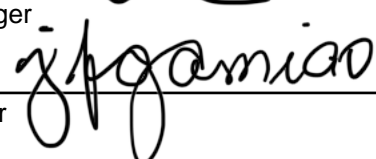
8.(c) The department shall make a name inquiry into the criminal history records for the first two years a case management agency is licensed or a home is certified and annually or biennially thereafter depending on the licensure status of the case management agency or certification status of the home.

Comment:

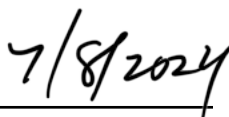
8(a)(2) APS/CAN checks were lapsed for CG#1, CG#3, and CG#4.
CG#1 APS/CAN was due on or before 3/15/2024 and was completed on 5/10/2024.
CG#3 APS/CAN was due on or before 4/14/2024 and was completed on 5/10/2024.
CG#4 APS/CAN was due on or before 1/15/2024 and was completed on 5/10/2024.

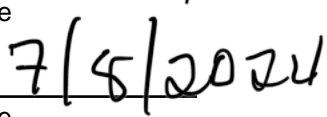
8(c) State Name Check (eCrim) was lapsed for CG#1, CG#3, and CG#4.
CG#1 State Name Check (eCrim) was due on or before 1/5/2024 and was completed on 3/26/2024.
CG#3 State Name Check (eCrim) was due on or before 3/30/2024 and was completed on 7/3/2024.
CG#4 State Name Check (eCrim) was due on or before 12/26/2023 and was completed on 2/8/2024.



Compliance Manager


Primary Care Giver



Date


Date

CTA RN Compliance Manager: PO Lim

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

PCG's Name on CCFFH Certificate: Josephine Gamiao
(PLEASE PRINT)

CCFFH Address: 91-1082 Kauiki St. Ewa Beach HI 96706
(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)(2)	• Lapsed for CG#1, CG#3 and CG#4. Obtained New APS/CAN.	5/10/24	• Home will use a Calendar reminder to prevent future Lapse.
8(c)	• Lapsed ecrim for CG#1, CG#3, and CG#4 cannot be corrected.	• 3/26/24 • 7/3/2024 • 2/8/2024	• Home will use a Calendar reminder to prevent future Lapses.

All items that were corrected are attached to this POC

PCG's Signature: J. Gamiao

Date: 7/8/2024

CTA has reviewed all corrected items