

# Foster Family Home - Deficiency Report

Provider ID: 1-588527

Home Name: Marissa Domingo, CNA

Review ID: 1-588527-14

91-708 Aikanaka Road

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 6/26/2024

## 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 3-bed annual inspection.

Deficiency Report issued during CCFFH inspection with a Plan of Correction due to CTA within 30 days of inspection. (Issued on 6/26/2024)

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

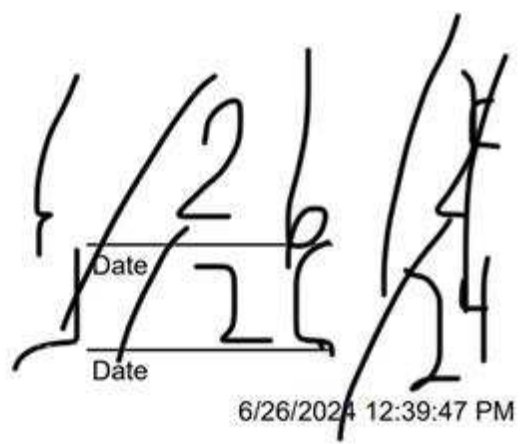
8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

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)-APS/CAN for HHM#3 lapsed on 3/28/2024 with no current results present. Ecrim for CG#1, CG#2, HHM#1 and HHM#3 lapsed on 12/9/2023 and was done on 2/2/2024.

  
Compliance Manager  
  
Primary Care Giver

  
Date  
Date