

Foster Family Home - Deficiency Report

Provider ID: 1-240093

Home Name: Kim Justine Baengan, CNA

Review ID: 1-240093-1

76 Laimi Road

Reviewer: David Ayling

Honolulu

HI 96817

Begin Date: 12/3/2024

Foster Family Home Required Certificate [11-800-6]

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

Comment:

6.(d)(1) - Home inspection for a new 2 person CCFFH certification. Deficiency Report issued during home inspection with written plan of correction due to CTA by 1/3/25.

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 #2 needs current APS/CAN and fingerprints (not within 6 months. Applying to be a SCG).

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) - CG #3 needs a current CPR/First Aid certificate from an approved school.



Compliance Manager


Primary Care Giver

Date 12/3/2024
Date 12/3/2024