## Foster Family Home - Deficiency Report

Provider ID: 1-220018

Home Name: Leilani Paraan, NA Review ID: 1-220018-7

91-959 Hanakahi Street Reviewer: Po Lim

Ewa Beach HI 96706 Begin Date: 11/19/2024

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 11/19/2024 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)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1)

Second Fingerprint check is overdue for CG#1 and CG#2 due on/before 10/15/2024.

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

41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the

Comment:

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41.(c)- CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#1. CG#1 requires 12 hours of in-service training, but had only 9.5 hours attended in 2023.

Compliance Manager

rimary Care Giver

Date 11/19/2024 2:5

1/19/2024 2:51:36 PM