Foster Family Home - Deficiency Report

Provider ID:

1-210019

Home Name:

Edielyn Manzano, CNA

Review ID:

1-210019-9

94-1348-A Waipahu Street

Reviewer:

Maribel Nakamine

Waipahu

HI 96797

Begin Date:

11/15/2024

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 recertification inspection. Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days of inspection (issued on 11/15/24). **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; Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and 8.(a)(2) Comment: 8.(a)(1)- No sex offender search results present for CG#1, CG#2, CG#3, CG#5, and HHM#2. 8.(a)(1), (2)- CG#3's APS/CAN lapsed on 1/11/24 and was not renewed until 3/15/24; Ecrim lapsed on 1/11/24 and was not renewed until 2/29/24. **Foster Family Home Fire Safety** [11-800-46] The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times 46.(a) of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors. Comment: 2024.

46.(a)- CCFFH's last monthly fire drill on record was dated 8/4/24. None for the months of September 2024 and October

Foster Family Home

Records

[11-800-54]

54.(b)

The home shall maintain separate notebooks for each client in a manner that ensures legibility, order, and timely signing and dating of each entry in black ink. Each client notebook shall be a permanent record and shall be kept in detail to:

Comment:

Daga 4 of 4

54.(b)- no signatures present of caregivers after each dated entry for Client #1's progress notes.

Compliance Manager

Date

4414E10004 E-07-04 DL4

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)

Chapter 11-800

PCG's Name on CCFFH Certificate: Eolelish B. Manzon

CCFFH Address: 94-1348 AWoupahu St. Woupahu HI 96797

(PLEASE PRINT)

-	The second day of the processor of the second day of the second da	(= r raner)
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)(i)(2 46.(a)	CGHI, CGH2, CGH3, CGH5 and HHW#2: No sex offenoler gearch result has been obtained and compiled the documents in the name chart binder: CGH3 Lapse counnot be corrected APG/CAN Lapse 1/11/24 Ecrim Lapse 1/11/24 Lapse cannot be corrected	3/15/24 2/29/24	From now on, I will make sure to update all sex offender results. I will use a checklist for proper documentation. From now on I will use the spreadsheet on the desk-top computer to identify when is the due date to prevent it from happening prevent it from happening
		11/20/24	the expiration due dates the expiration due dates to avoid lapses in the suture. The sure of s

All items that were corrected are attached to this POC

PCG's Signature:

maga

Date: 12/10/24

CTA has reviewed all corrected items