

Foster Family Home - Deficiency Report

Provider ID: 1-220005

Home Name: Ronalyn Mamaclay, NA

Review ID: 1-220005-7

94-1108 Hilihua Place

Reviewer: Deborah Baumgart

Waipahu

HI 96797

Begin Date: 11/22/2024

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 annual inspection.

Deficiency report issued during CCFFH inspection with a Plan of Correction due to CTA within 30 days of inspection. (Issued 11/22/24)

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;

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#6 APS/CAN fingerprints lapsed 5/5/2024 done 6/3/2024.

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

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

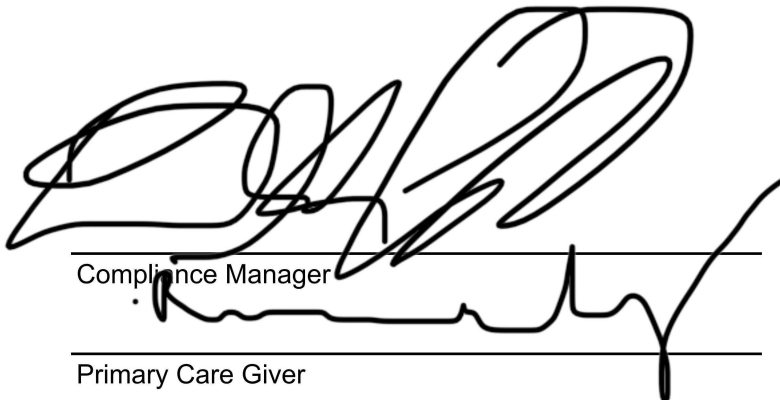
41.(b)(7)-CG#5 TB clearance lapsed 10/8/2018 with no current results present.

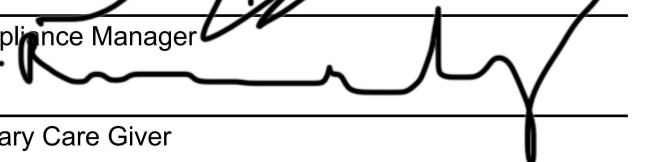
Foster Family Home Fire Safety [11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times 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.

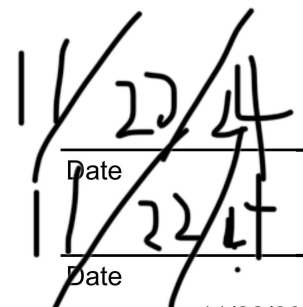
Comment:

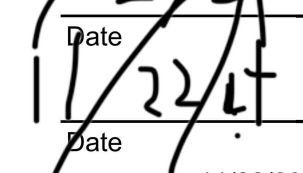
46.(a)-No monthly fire drills completed from 5/24-7/24 and 10/24.



Compliance Manager


Primary Care Giver



Date


Date

CTA RN Compliance Manager: Deborah Baumgart

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

PCG's Name on CCFFH Certificate: Ronalyn Mamanlay

CCFFH Address: 94-1108 Hilihua Pl. Waipahu HI 96797

Rule Number	Correction 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)(1) 8-(a)(2)	SCG mislaced the current fingerprints, but I have the recent one.	11/29/24	check the binder monthly to prevent lapsed NPS/CAN and fingerprints documents.
41-(b)(7)	PCG will check the tb clearance before putting in the binder. I got the new tb clearance from the caregiver.	11/29/24	Always to make sure to check the exp. date before putting in the binder.
46.(a)	Notify all SCG to do fire drill monthly	11/29/24	PCG will create a monthly reminder.

All items that were corrected are attached to this POC

PCG's Signature: RMamanlay

Date: 11/29/24

X CTA has reviewed all corrected items.