

# Foster Family Home - Deficiency Report

**Provider ID:** 1-510166

**Home Name:** Annabelle Riel, LPN

**Review ID:** 1-510166-16

94-125 Pahu Street #9

**Reviewer:** Maribel Nakamine

Waipahu HI 96797

**Begin Date:** 2/28/2025

Foster Family Home	Required Certificate	[11-800-6]
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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 2/28/25).

Foster Family Home	Background Checks	[11-800-8]
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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)- CG#1, CG#2, and CG#3 were without the sex offender search results.

8.(a)(2)- CG#1's APS/CAN lapsed on 1/12/24 and was not renewed until 11/26/24.

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(b)(5) Provide non-medical transportation through possession of a valid Hawaii driver's license and access to an insured vehicle, or an alternative approved by the department.

Comment:

41.(b)(5)- CCFFH's Alternate Transportation Plan was not updated to reflect current driver.

Foster Family Home	Client Care and Services	[11-800-43]
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43.(b) One bed in each home shall be reserved for Medicaid recipients, or if certified by the department for three beds, two beds shall be reserved for Medicaid recipients, unless the requirements for two private pay individuals under section 321-481, HRS are met.

Comment:

43.(b)- No second bedroom available for a 2nd client as CCFFH is licensed for a 2-bed CCFFH and bedrooms were being occupied by household members/caregivers.

# Foster Family Home - Deficiency Report

Foster Family Home

Physical Environment

[11-800-49]

49.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(a)(2)- No grab bar present near client's toilet.

49.(a)(4)- CCFFH's kitchen with 4 steps; no wheelchair/walker accessibility.

49.(c)(3)- CCFFH's living room, kitchen floors were cluttered and dusty; stove grimy.

Marikell Nakamine, RN 2/28/25

Compliance Manager

Date

Annabelle Riech

Primary Care Giver

Date

2/28/25

CTA RN Compliance Manager: Maribel Nakamine

Community Care Foster Family Home (CCFFH)  
Written Correction Action Plan (CAP)  
Chapter 11-800

PCG's Name on CCFFH Certificate: Annabelle Riel

CCFFH Address: 94-125 Pahu Street #9  
Waipahu, Hawaii 96797

Rule Number	Corrective Action Taken- How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategies – How will you prevent each violation from happening again in the future?
6.(d)(1)	The written plan of correction is to be completed by 30 days to 03/28/2025	03/14/2025	Submit to reviewer. It will be shown in a binder for all inspection reports and be accessible.
8.(a)(1)	APS/CAN were completed and renewed on 11/26/2024	11/26/2025	All CG Staff clearance will be compliant. To ensure it is completed on time, we set a deadline ahead of time and mark our calendar.
41(b)(5)	CCFFH's Alternative Transportation Plan was completed	03/14/2025	All binders for all inspection reports are accessible, including CCFFH's Alternative Transportation Plan
43.(b)	Second Bedroom is available as a licensed 2-bedroom client CCFFH and not occupied by household member/caregivers	03/14/2025	Licensed 2-bedroom CCFFH is available when not occupied with Medicaid recipients.
49.(a)(2)	Grab bars in bath and toilet rooms are installed.	03/14/2025	Grab bars in both and toilet rooms are installed.
49.(a)(4)	CCFFH are wheelchair/walker accessible to sleeping rooms, bathrooms, common area and exits such as mini fridge/microwave and food accessible on the first-floor area	03/14/2025	CCFFH are wheelchair accessible to sleeping rooms, bathrooms, common area and exits, as appropriate. Please see attached image.
49.(c)(3)	CCFFH is maintained in clean, well ventilated, adequate lighted and safe manner	03/14/2025	CCFFH is maintained in clean, well ventilated, adequate lighted and safe manner. To ensure it stays clean, daily sweep/check of 1 <sup>st</sup> floor area, and weekly deep cleaning have been scheduled.

All items that were fixed are attached to this CAP

PCG's Signature: Annabelle Riel 3/31/25

X CTA has reviewed all corrected items