Foster Family Home - Deficiency Report

Provider ID: 1-130028

Home Name: Elsa Atis, CNA Review ID: 1-130028-21

91-1047 Kuhina Street Reviewer: Po Lim
Ewa Beach HI 96706 Begin Date: 7/11/2025

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 3 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 7/11/2025 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) Fingerprint/ background check was overdue for CG#1, #2, and #3. CG#1 and CG#3 Fingerprint/background check was due on or before 7/7/2025 and were not present in the CCFFH file. CG#2 fingerprints are not present in the file.

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

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41.(c) CGFFH did not have evidence of required number of hours of in-service training per calendar year for CG#3. CG#3 requires 12 hours of in-service training, but had only 4 hours attended in 2024

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Foster Family Home Records [11-800-54]

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

Comment:

54(c)(2) No current signature for service plan present for Client#3 on 3/2025.

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Primary Care Giver Date