

# Foster Family Home - Deficiency Report

Provider ID: 1-230064

Home Name: Kathrina Jones  
Agngarayngay, CNA

94-132 Poohuku Way

Waipahu HI 96797

Review ID: 1-230064-6

Reviewer: Maribel Nakamine

Begin Date: 6/24/2025

## 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 recertification inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days of inspection (issued on 6/24/25).

PCG requests to increase from a 2-client to a 3-client CCFFH.

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

41.(a)(3) Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and

Comment:

41.(a)(3)- No Job Experience form completed/present for CG#5.

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

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(b)(2)- CG#4 and CG#8 without evidence of having conducted a monthly fire drill for the past 12 months.

## Foster Family Home Client Rights [11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Client #1 with a video surveillance camera inside bedroom and no consent was present.

## Foster Family Home Records [11-800-54]

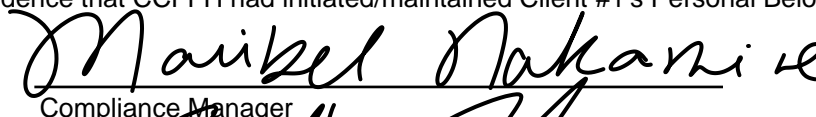
54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

54.(c)(8) Personal inventory.

Comment:

54.(c)(6)- No signatures after each dated entries for Client #2's progress notes.

54.(c)(8)- No evidence that CCFFH had initiated/maintained Client #1's Personal Belongings Inventory List.

  
Compliance Manager  
  
Primary Care Giver  
Date 6/24/25  
Date 6/24/25

CTA RN Compliance Manager: Maribel Nakamine

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

PCG's Name on CCFFH Certificate: Kathrina Jones Agngarayngay

(PLEASE PRINT)

CCFFH Address: 94-132 Poohuku Way, Waipahu, HI 96797

(PLEASE PRINT)

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?
41.1.3	Job Experience for CG#5 has been completed and attached to CG#5 file	6/25/25	By contacting the SCG's employer(s) to confirm job experience matches the dates of employment as well as duties and responsibilities are in line with SCG's job capacity.
46.b.2	CG#4 conducted the fire drill the evening of 6/24/25	6/24/25	Home will create a schedule and reminders assigning SCGs and ensures the schedule maintains each SCG conducts the fire drill once or twice a year.
	CG#8 conducted the fire drill the morning of 6/25/2025 CG#4 will conduct the fire drill for the month of July 2025 and CG#8 in August 2025.	6/25/25	
53.b.9	Client#1 POA has reviewed and signed the use of video surveillance consent within the home.	6/25/25	Home and the POA will review the consent together. Home will ensure the POA agrees and sign the consent prior to installing video surveillance equipment.
54.c.6	CMA allowed me to sign the previous notes that were not signed. I have started adding signatures after writing notes.	6/25/25	Home will prepare a checklist and review the checklist following patient care to ensure all requirements are met.
54.c.8	POA and I conducted the inventory of client #1's personal belongings and attached it to the client binder.	6/25/25	Home and POA will conduct joint inventory of the client belongings, document the items in the belonging checklist and both parties signs the

☒ All items that were corrected are attached to this POC

PCG's Signature: \_\_\_\_\_

Date: July 9, 2025

☒ CTA has reviewed all corrected items