

Foster Family Home - Deficiency Report

Provider ID: 1-561094

Home Name: Magielyn Dulay, CNA

Review ID: 1-561094-17

2421 Kini Place

Reviewer: Ryan Nakamura

Honolulu HI 96819

Begin Date: 6/17/2025

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 CCFFH inspection for 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 6/17/2025).

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): No evidence provided by CCFFH of any fire drills in the past 12 months were conducted by CG#4 and CG#5. No documentation provided.


Foster Family Home Quality Assurance [11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a): Internal emergency management policy has a signature sheet that is not signed by CG#4 and CG#5.



Compliance Manager


Primary Care Giver

6/17/25

Date
6/17/25

Date

CTA RN Compliance Manager: Ryan Nakamura

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

PCG's Name on CCFFH Certificate: Magielyn Dulay
(PLEASE PRINT)

CCFFH Address: 2421 Kini Place Honolulu HI 96819
(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?
46.(b)(2)	Cannot be corrected. Fire drills for SCG#4 and SCG#5 were conducted and placed in home binder.	7/13/2025	Home should know the importance of Fire and Safety. Home will make sure that all Caregivers must conduct a fire drill monthly. Home will use a wall calendar to put all due dates to prevent future lapses.
50.(a)	Cannot be corrected. Internal Emergency Management policy were already signed by SCG#4 and SCG#5.	7/13/2025	Home will make sure that Internal emergency management policy must signed by all caregivers. Home will make a check list for all Caregivers to make sure that all sheets must signed and dated.

☒ All items that were corrected are attached to this POC

PCG's Signature: _____

Date: 7/16/2025

☒ CTA has reviewed all corrected items