

Foster Family Home - Deficiency Report

Provider ID: 1-100007

Home Name: Marivel Billete, CNA

Review ID: 1-100007-21

91-1031 Makaike Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 6/16/2025

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 2^{TV}/₃ bed re-certification inspection.

Client#1 Form 1147 has expired on 2/5/2025. No new in records.

Deficiency Report issued during CCFFH inspection via email on 6/16/2025 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

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;

54.(c)(5) Medication schedule checklist;

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;

Comment:

54(c)(2) No current service plan present for Client# 1. Last one in record is dated 4/20/2024. No current signature for last dated service plan.

54(c)(5) No MAR present for June 2025 for Client#1.

54(c)(6) No ADL flow sheet present for Client#1 for May 2025 and June 2025.

Compliance Manager

Primary Care Giver

Date

Date

CTA RN Compliance Manager:

Po Lim, RN

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

PCG's Name on CCFFH Certificate:

Marivel C. Billete

(PLEASE PRINT)

CCFFH Address:

91-1031 Makaike St Ewa Beach, HI 96706

(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?
54(C)(2)	4/2/25 SP was given to PCG on 6/19/25 by new RN assigned. PCG brought it to PCP on 6/30/25 for signature	6/30/25	PCG to be more aware of SP expiration by tabs with date and inform all on team to assure competence of SP before expiration
54(C)(5)	MAR for June 2025 updated on the same day 6/16/25 evening	6/16/25	PCG should have routinely write on the actual MAR each time medication is administered instead of waiting to complete it on another date. PCG will tab
54(C)(6)	ADL for May was misfiled by new visiting new RN. PCG corrected this immediately shortly after CTA visit. June ADL/Flowchart was completed that same day evening	6/16/25	PCG must routinely write on the actual ADL/Flowchart as task is completed per day. PCG will tab Flowchart
6(d)(1)	Expired 1147 on 2/5/25 was completed 12/17/2024 was finally given to PCG for binder on 6/17/2025 with PCP signature 01/11/25	6/17/2025	PCG will tab indicating expiration date of 1147 per year.

☒ All items that were corrected are attached to this POC

PCG's Signature:

Marivel C. Billete

Date:

07/14/2025☒ CTA has reviewed all corrected items