

# Foster Family Home - Deficiency Report

Provider ID: 1-210071

Home Name: Victoria B. Baxa, CNA

Review ID: 1-210071-11

94-442 Alapine Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 7/10/2025

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 3 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 7/10/2025 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(a)(2) Be a NA, an LPN, or RN;

Comment:

41(a)(2) CG#2 CNA license expired on 9/30/2024 and no new on file.


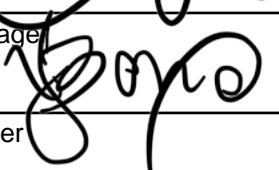
3 Person Fire Safety, Natural Disaster	3 Person Fire Safety	(3P) Fire
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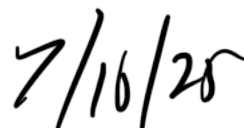
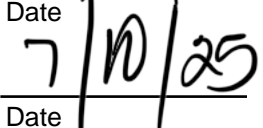
(3P)(b)(6) Fire shall include all SCGs at least once per year

Comment:

(3P)(b)(1)(2)(4)(6) The CCFFH did not have evidence that fire drills had been conducted monthly/were being held at different times of the day, evening, and night/included testing of the smoke detectors/included each CG at least once per year.

CG#2 have not conducted a fire drill in the past 12 months.

  
\_\_\_\_\_  
Compliance Manager  
  
\_\_\_\_\_  
Primary Care Giver

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date

CTA RN Compliance Manager: Terri Van Houten

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

PCG's Name on CCFFH Certificate: Victoria B. Baxa

(PLEASE PRINT)

CCFFH Address: 94-442 Alapine Street, 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.(a)(2)	CG #2 unexpired CNA license was retrieved and placed to CCFFH binder.	7/12/25	The home will implement a checklist system to track expiration dates and ensure all documents are kept up to date.
3P(b)(6)	CG #2 fire drill had been lapse of evidence within the 12 month calendar and cannot be corrected.	7/12/25	Fire drill will be done by each caregiver at least once a year and in different times. Home will develop a schedule and has it posted in the refrigerator.

☒ All items that were corrected are attached to this POC

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

Date: 7/12/25

☒ CTA has reviewed all corrected items