

Foster Family Home - Deficiency Report

Provider ID: 1-200045

Home Name: Jo-Ann Ganitano-Ulep, CNA

Review ID: 1-200045-11

91-1289B Kilipue Street

Reviewer: Po Lim

Ewa Beach

HI 96706

Begin Date: 8/20/2025

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 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 8/20/2025 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

Foster Family Home

Personnel and Staffing

[11-800-41]

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG#1, #2, #3.

CG#1 has expired TB on 6/13/2025.

CG#2 has expired TB on 3/20/2025.

CG#3 has expired TB on 7/3/2025.

41.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG#2. It was due on 12/31/2024.

Foster Family Home

Fire Safety

[11-800-46]

46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

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

Comment:

46.(a) - Last fire drill present in record was documented on 4/2025. No fire drill documentation present for 8/24, 9/24, 11/24, 12/24, 2/25, 3/25, 5/25, 6/25, and 7/25.

46.(b)(2)- CG#2 did not have evidence of conducting a monthly fire drill within the past 12 months.

Compliance Manager

Primary Care Giver

Date

Date

8/20/25

8/20/25