

Foster Family Home - Deficiency Report

Provider ID: 1-170028

Home Name: Jenelyn Laforga, CNA

Review ID: 1-170028-17

94-502 Pilimai Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 1/12/2026

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 recertification inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days of inspection (issued on 1/12/26).

6.d.1- Client #2's 1147 expired on 12/20/25 and no current document was present in client's chart/records.

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)- CG#2's TB clearance expired on 1/6/26 and no current result was present. CG#3's current TB clearance was not documented on DOH approved form.

41.(b)(8)- CG#1's CPR/basic first aid training expired on 11/1/25 and no current certification was present.

Foster Family Home Client Care and Services [11-800-43]

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3)- No RN delegations present on oral medications administration for CG#6 for Client #2.

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), (b)(2)- No monthly fire drills present for the months of October 2025, November 2025, and December 2025. CG#6 without evidence of having conducted a monthly fire drill for the CCFFH.

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Foster Family Home

Medication and Nutrition

[11-800-47]

47.(d) Use of physical or chemical restraints shall be:

47.(d)(1) By order of a physician;

Comment:

47.(d), (d)(1)- Client #1 with use of full bedrails; no MD order was present.

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;

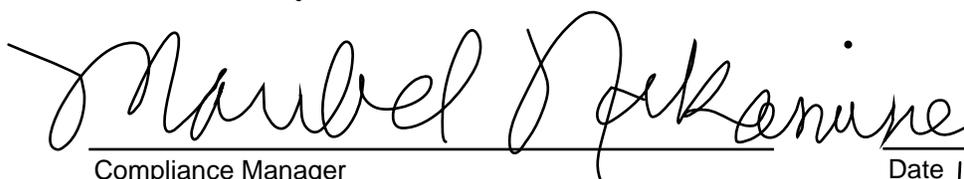
54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to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

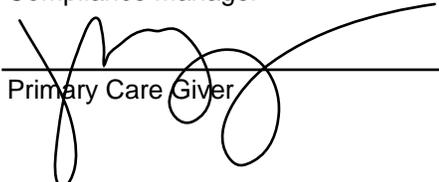
Comment:

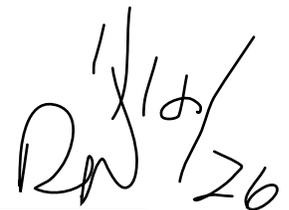
54.(c)(2)- Client #2's Service Plan/HAP dated 7/25/25 without the client's signature.

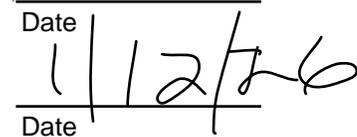
54.(c)(5)- Client #1 and Client #2 without the January 2026 Medication Administration Records (MAR).

54.(c)(6)- Client #1 and Client #2 were without the January 2026 ADLs/Daily Care Flowsheets.


Compliance Manager


Primary Care Giver

Date  1/12/26

Date  1/12/26

CTA RN Compliance Manager: DEBORAH BAUMGART

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

PCG's Name on CCFFH Certificate: JENELYN LAFORGA
(PLEASE PRINT)

CCFFH Address: 94-502 PILIMAI ST WAIPAHU HAWAII 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?
6.d.1	Client #2 was updated by CMA. 1147 form was filed in client binder.	1/16/2026	PCG will ensure that current 1147 is provided and filed in client folder. Home will utilize calendar to input reminder for CMA when visit.
41.b.7	CG #2 TB completed 1/17/2026 CG #3 took a new TB clearance on 1/26/2026 to update DOH approved form. It placed into home record.	1/17/2026 1/28/2026	PCG will use calendar to input date that are close to expire at least two weeks to avoid lapse.
41.b.8	CG #1 attend the training class for CPR/Basic first aid on 1/13/2026. Filed in the binder for a record.	1/13/2026	PCG will utilize phone or wall/desk calendar in the beginning of the month and one week before expiration as a reminder to myself and to other SCG's.
43.c.3	PCG contacted CMA RN on 1/20/2026 to perform the delegation for oral med.admin.to CG #6 for client#2. Sign form was filed in home binder.	1/23/2026	PCG always have a medication checklist to do proper route of medication that needs to be delegate by CM nurse.
46.c	Filled the OCT., NOV., DEC.,2025 fire drill. Filed in the binder for home record.	1/13/2026	Home will utilize calendar or gadgets to set a reminder of each month that fire drill must be done.

All items that were corrected are attached to this POC

PCG's Signature: J Laforga

Date: 30 JAN 2026

CTA has reviewed all corrected items

CTA RN Compliance Manager: DEBORAH BAUMGART

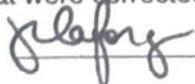
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Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
46.b.2	CG #6 was conducted fire drill 1/23/2026. Placed in the home binder.	1/23/2026	PCG will use wall calendar or write in the poster board for a reminder to do monthly fire drill.
47.d d.1	A physician order for full side rail was obtained and placed in client #1 binder.	1/27/2026	PCG will make sure not to install any side rail on clients bed, unless there is an order of a doctor.
54.c.2	S/plan for client #2 was signed and filed in clients binder.	1/16/2026	PCG ensure that current S/P is being signed and dated correctly. Use calendar, post it and highlight as reminder for myself and CMA.
54.c.5	Client #1 and client #2 MAR for January was filled and signed. Filed in the binder clients.	1/16/2026	PCG will set a daily reminder using phone/tablet to avoid error for documentation. MAR will be initial/signed after medication safe given.
54.c.6	ADLs/Daily care flowsheet for client #1 and client #2 was done and signed. Filed in the clients binder.	1/16/2026	PCG/SCG will initial daily using ADLS flowsheet form after assisting each client.

All items that were corrected are attached to this POC

PCG's Signature: 

Date: 30JAN20126

CTA has reviewed all corrected items