

Foster Family Home - Deficiency Report

Provider ID: 1-200047

Home Name: Jenny Ponciano, RN

Review ID: 1-200047-11

94-1132 Lumiauau Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 8/14/2025

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 8/14/2025 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)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(8) CG#3 lapsed on CPR/First Aid training. It was due on/before 8/13/2024 and was completed on 6/19/2025.

Compliance Manager

Primary Care Giver

Date

Date

CTA RN Compliance Manager: Po Lim

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

PCG's Name on CCFFH Certificate: Jenny Ponciano

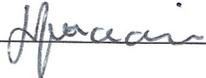
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CCFFH Address: 94-1132 Lumiauau Street, Waipahu, Hawaii 96797

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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?
41.(b) (8)	The lapse cannot be corrected; however, to prevent recurrence, CG#3 must renew CPR/First Aid Training Certificate at least 30 days before expiration.	6/19/2025	CG#1 will create a calendar reminder of due dates one (1) month in advance to prevent future lapses.

All items that were corrected are attached to this POC

PCG's Signature: 

Date: 09/10/2025

CTA has reviewed all corrected items