

# Foster Family Home - Deficiency Report

Provider ID: 1-170009

Home Name: Norma Maneja, CNA

Review ID: 1-170009-16

91-1165 Kumulipo Street

Reviewer: Maribel Nakamine

Kapolei HI 96707

Begin Date: 2/11/2026

## 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 3-bed recertification inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 10 business days (issued on 2/11/26).

6.d.1- Client #1's 1147 dated 10/8/25- 10/8/26 without the client's doctor/PCP's signature. Client #2's 1147 expired on 2/2/26 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

Comment:

41.(b)(7)- CG#1's TB clearance result dated 6/11/25 was not documented on DOH approved form.

## 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 and Client #3 with use of full bedrails; unable to locate MD's orders.

# Foster Family Home - Deficiency Report

Foster Family Home

Physical Environment

[11-800-49]

- 49.(b)(2) Be limited to two clients, both of whom shall consent to the arrangement; and
- 49.(b)(3) Be in close proximity to the primary or substitute caregiver for timely intervention for nighttime needs or emergencies, or be equipped with a call bell, intercom, or monitoring device approved by the case management agency.
- 49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(b)(2)- Client #2 and Client #3 were in a shared bedroom. No written consent was present from Client #3's POA/Client.  
49.(b)(3)- CG#1's bedroom was located upstairs. No call system was in place for Client #1, Client #2, and Client #3.  
49.(c)(3)- Client #1, Client #2, and Client #3's bedroom windows and screens were very dusty. Note that Client #1 in particular with dust allergy as stated in chart/records.  
Client #1's glass window was cracked. Windows were blocked with several household items such as coolers, bags, toys, etc. preventing fresh air from entering/circulating inside the client's bedroom/CCFFH.  
Client #1's window screen with a hole- vermin, insects, mosquitoes could enter inside the client's bedroom and possibly bit client.  
No hot water in client's bathroom sink/faucet- per CG#1, plumber did not install.

Foster Family Home

Client Rights

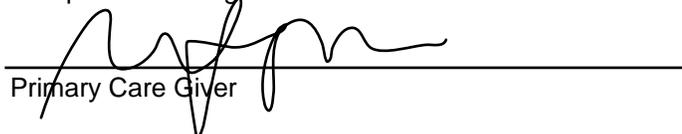
[11-800-53]

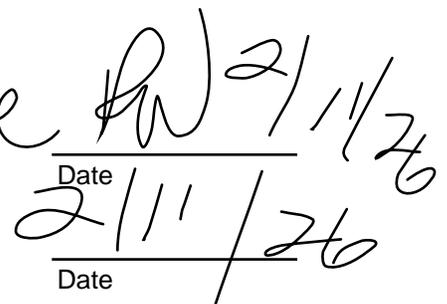
- 53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Client #2 & Client #3's shared bedroom door knob without a lock from the inside. Under My Choice My Way, clients have to be able to lock bedroom for privacy.

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

  
\_\_\_\_\_  
Date  
2/11/26  
\_\_\_\_\_  
Date

CTA RN Compliance Manager: Deborah Baumgart / Maribel Nakamine

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

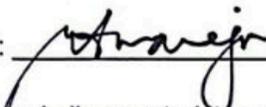
PCG's Name on CCFFH Certificate: Norma B Maneja

CCFFH Address: 91-1165 Kumulipo St Kapolei HI 96707

Rule Number	Corrective Action Taken - How was each issue fixed for each violation?	Date each violation was fixed	Preventative strategy - How will you prevent each violation from happening again in the future?
6.d.1	Client #1's 1147 form was signed by PCP and filed inside the client's binder. Client #2's 1147 form was updated and filed in the client's binder.	02/17/2026	Home will use a spreadsheet tracker to ensure that all required forms are up-to-date, signed, and appropriately filed.
41.(b)(7)	CG#1 retrieved a DOH approved TB clearance form signed by PCP	02/12/2026	Home will ensure that all clearance forms are appropriate to meet standards and requirements.
47.(d),(d)(1)	PCG obtained signed orders for use of bed rails from PCP for Client #1 and Client #2 and placed in the client's binders.	02/17/2026	PCG will ensure that PCP orders are up-to-date, signed, and filed in clients' binders.
49.(b)(2)	Written consent for accommodation in a shared room was obtained from Client #3's POA and filed in the client's binder.	02/17/2026	PCG will obtain consent to be in a shared room upon admission for each client as appropriate.

All items that were fixed are attached to this CAP

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



Date: 2-23-26

CTA has reviewed all corrected items

CTA RN Compliance Manager: Deborah Baumgart / Maribel Nakamine

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

PCG's Name on CCFFH Certificate: Norma B Maneja

CCFFH Address: 91-1165 Kumulipo St Kapolei HI 96707

Rule Number	Corrective Action Taken - How was each issue fixed for each violation?	Date each violation was fixed	Preventative strategy - How will you prevent each violation from happening again in the future?
49.(b)(3)	Camera was installed in Client #1, #2, and #3 rooms for monitoring and timely interventions. Written consent forms from Clients/ POA were obtained and filed in clients' binders.	02/19/2026	PCG will obtain written consent as proof of agreement for camera monitoring upon admission to initiate safety measures.
49.(c)(3)	Clients' bedroom windows were cleaned and disinfected. Client #1's window and screen was repaired/replaced. All household items outside of the windows were cleared and donated. PCG had a plumber install hot water in Client #1's bathroom.	02/18/2026	Home will ensure that all unnecessary items/ clutter are cleared to provide a neatly mannered home for the clients. Home will ensure monthly maintenance on all windows to allow proper air circulation inside clients' bedrooms. Home will also ensure that it is equipped with appropriate plumbing.
53.(b)(9)	New bedroom door knob with lock was installed in Client #2 and Client #3's bedroom to ensure their rights to privacy.	02/12/2026	Home will ensure that a working door knob with the ability to lock from inside be installed and maintained to protect clients' privacy.

All items that were fixed are attached to this CAP

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

Date: 2-23-26

CTA has reviewed all corrected items