

# Foster Family Home - Deficiency Report

Provider ID: 2-240049

Home Name: Kharen Cabuyadao, LPN

Review ID: 2-240049-4

14 Kehaulani Street

Reviewer: Po Lim

Hilo HI 96720

Begin Date: 3/9/2026

## 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 inspection for a 2 bed CCFFH re-certification.

Deficiency Report issued during CCFFH inspection via email on 3/9/2026 with Plan of Correction due to CTA within 10 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.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41.(b)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG#2. CG#2 TB clearance was not recorded on the State standardized form.

41.(c) CCFFH did not have evidence of required number of hours of in-service training per calendar year for CG#3. CG#3 requires 8 hours of in-service training, but had only 3 hours attended in 2025.


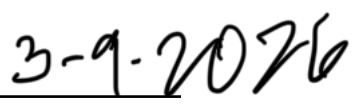
## Foster Family Home Fire Safety [11-800-46]

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.

Comment:

46.(a) - Last fire drill present in record was documented on 1/30/2026. No fire drill documentation present for February 2026.

  
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Compliance Manager  
  
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Primary Care Giver

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