

Foster Family Home - Deficiency Report

Provider ID: 1-509466

Home Name: Vicenta Domingo, CNA

Review ID: 1-509466-17

94-1120 Lumikula Street

Reviewer: Ryan Nakamura

Waipahu HI 96797

Begin Date: 4/14/2026

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 CCFFH inspection for 2 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 10 business days of inspection (inspection date: 4/14/2026).

Foster Family Home Background Checks [11-800-8]

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(2): APS/CAN clearance was due by 3/28/2026 for CG#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.

Comment:

46.(a): Evidence present in CCFFH records of CCFFH documented fire drills prior to conducting fire drill. Documentation present of fire drill conducted on 4/15/2026 despite CTA reviewed documentation on 4/14/2026.

Foster Family Home Records [11-800-54]

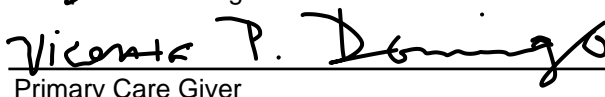
54.(c)(5) Medication schedule checklist;

Comment:

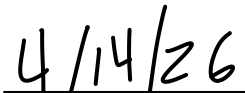
54.(c)(5): Discrepancy noted in the medication administration compared to physician order for vitamin D3 for client #1. CG#1 stated CG administered vitamin D3 1000iu 1 capsule PO daily but the order was vitamin D3 2000iu 1 capsule PO daily.



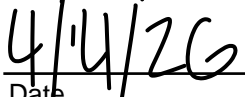
Compliance Manager



Primary Care Giver



Date



Date