

Foster Family Home - Deficiency Report

Provider ID: 1-180038

Home Name: Maria Cristine Arzadon, CNA

Review ID: 1-180038-16

1438 Nanakai Street

Reviewer: Po Lim

Pearl City

HI 96782

Begin Date: 4/21/2026

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 3 bed CCFFH re-certification.

42.a. Client #3 Form 1147 was not present in the file. Client #1 was expired on 5/1/2025.

Deficiency Report issued during CCFFH inspection via email on 4/21/2026 with Plan of Correction due to CTA within 10 days of inspection date of issuance.

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 checks were overdue for CG#1 and CG#3.

CG#1 APS/CAN was due on or before 4/8/2026 and was not present in the CCFFH file.

CG#3 APS/CAN was due on or before 5/30/2025 and was not present in the CCFFH file.

Foster Family Home Personnel and Staffing [11-800-41]

41.(a)(2) Be a NA, an LPN, or RN;

41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with section 11-800-7.(b)(2).

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(a)(2) CG#3 have an expired RN License on 6/30/2025.

41.b.4. Disclosure form was not up to date for CG#1.

41.(b)(7) CCFFH did not have evidence of current TB clearance or exclusion for CG#3 and HHM#3.

CG#3 TB clearance expired, was due on/before 5/14/2025 and was not present in the file.

HHM#3 TB clearance expired, was due on/before 11/24/2025 and was not present in the file.

41.(b)(8) CCFFH did not have evidence of current CPR/First Aid training for CG#3. It was due on/before 7/5/2025.

Foster Family Home - Deficiency Report

3 Person Staffing

3 Person Staffing Requirements

(3P) Staff

(3P)(b)(2) Staff Allowing the primary caregiver to be absent from the CCFFH for no more than twenty-eight hours in a calendar week, not exceed five hours per day; provided that the substitute caregiver is present in the CCFFH during the primary caregiver's absence. Where the primary caregiver is absent from the CCFFH in excess of the hours, the substitute caregiver is mandated to be a Certified Nurse Aide, per 321-483(b)(4)(C)(D) HRS.

Comment:

(3P)(b)(2) No evidence that a 3-bed sign out sheet was in use at the CCFFH. CTA Compliance manager was unable to verify the number of hours CG#2 (NA) worked in a day or week.

Foster Family Home

Records

[11-800-54]


54.(c)(1) Client's vital information;

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;

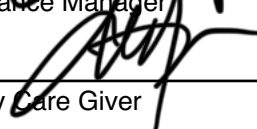
Comment:

54(c)(1) Client#1 did not have a current face sheet on file.

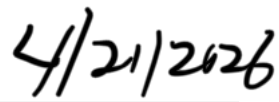
54(c)(6) Client #1 did not have evidence of RN monthly visit notes for 2/2026.
Client #2 did not have evidence of RN monthly visit notes for 11/2025, 1/2026, and 2/2026.



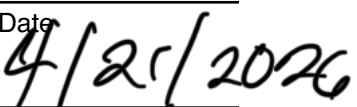
Compliance Manager



Primary Care Giver



Date



Date