

Foster Family Home - Deficiency Report

Provider ID: 1-250080

Home Name: Cora Dagdagan, NA

Review ID: 1-250080-3

3504 Ala Hapuu Street

Reviewer: Maribel Nakamine

Honolulu HI 96818

Begin Date: 6/10/2026

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1- Unannounced inspection made for a 2-bed recertification.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 10 business days (issued on 6/10/26).

6.d.1- Client #1's 1147 document dated 4/23/26- 4/23/27 was not signed by the client's PCP/MD.

Foster Family Home	Personnel and Staffing	[11-800-41]
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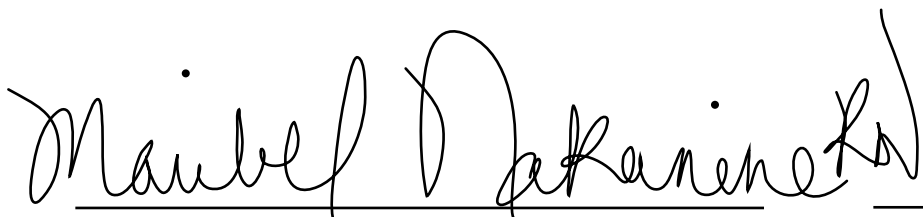
41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

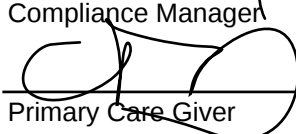
41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

41.(g) The primary and substitute caregivers shall be assessed by the department for competency in basic caregiver skills and specific skill areas needed to perform tasks necessary to carrying out each client's service plan. The documentation of training and skill competency of all caregivers shall be kept in the client's, case manager's, and caregiver's current records with the current service plan.

Comment:

41.(b)(8)- CG#3 without the CPR/Basic First Aid and Bloodborne pathogen and infection control certifications present.
41.(c)- CG#1 and CG#3 without any hours of the annual in-services- CG#1 lacked 12 hours and CG#3 lacked 8 hours.
41.(g)- CG#3 without evidence of having been checked with Client #1's basic skills checklist.


Compliance Manager


Primary Care Giver

Date 6/10/26

Date 6/10/26