

Foster Family Home - Deficiency Report

Provider ID: 1-260031

Home Name: Gigie Ana Layugan, CNA

Review ID: 1-260031-1

520 Ihe Street

Reviewer: Laurie Vosler

Honolulu

HI

96817

Begin Date: 6/19/2026

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) – CCFFH inspection conducted for a new 2 bed CCFFH certification. Report issued during CCFFH inspection with written plan of correction due to CTA within 10 business days from receipt of deficiency

Foster Family Home	Background Checks	[11-800-8]
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8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1) Sex Offender Registry Check was not present in the CCFFH file for CG# 1 & 2 and HHM# 2 & 3.

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(a)(2) Be a NA, an LPN, or RN;

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

41.(a)(2). CG# 1 no Prometric check completed.

41.(b)(7) CCFFH did not have evidence of current TB clearance on approved Department of Health Form for CG# 1 & 2.

Foster Family Home	Physical Environment	[11-800-49]
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49.(e) The home shall have policies regarding smoking on the property that:

Comment:

49.(e) - The CCFFH did not have evidence of a policy regarding smoking on the property.

Foster Family Home	Quality Assurance	[11-800-50]
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50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a) - The CCFFH did not have evidence that a documented internal emergency management policy and procedure was in place. No policy in record, CCFFH was shown where to locate on CTA website.

Foster Family Home - Deficiency Report

Foster Family Home

Client Rights

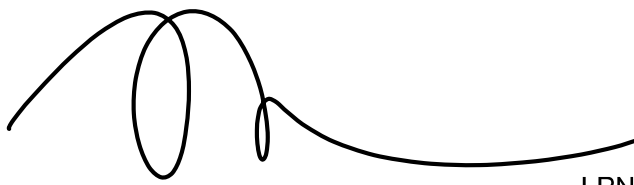
[11-800-53]

53.(b)(3) Be fully informed, prior to or at the time of admission, and during the client's stay, of services available in or through the home and related charges;

53.(b)(15) Have daily visiting hours and provisions for privacy established;

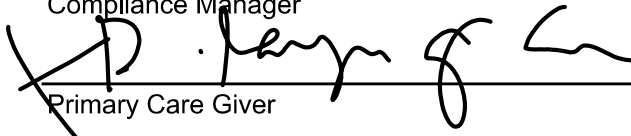
Comment:

53.(b)(15) The CCFFH did not have documentation of visiting hours. Per Federal Regulations, visiting hours cannot be restricted or limited for the client without specific reasons identified in the client's service plan which the client agrees to.



LPN

Compliance Manager



Primary Care Giver

06/19/2026

Date

06/19/2026

Date