Foster Family Home - Deficiency Report

Provider ID:	**1-511156**		
Home Name:	**Rosita Peneku, CNA**	**Review ID:**	**1-511156-19**
89-210 Huikala Place		Reviewer:	Laurie Vosler
Waianae HI 96792		Begin Date:	5/7/2026

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 annual inspection for 3 bed CCFFH. Report issued during CCFFH inspection with written plan of correction due to CTA within 10 business days of inspection. Inspection Date: 05/07/2026

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 05/04/2025. No fire drill documentation present for June 2025 through April 2026.

3 Person Fire Safety, Natural Disaster	**3 Person Fire Safety**	**(3P) Fire**

(3P)(b)(1) Fire shall be conducted monthly

(3P)(b)(2) Fire shall be held at different times of the day, evening, and night

(3P)(b)(4) Fire shall include testing of smoke detectors

(3P)(b)(6) Fire shall include all SCGs at least once per year

Comment:

(3P)(b)(1)(2)(4)(6) The CCFFH did not have evidence that fire drills had been conducted monthly/were being held at different times of the day, evening, and night/included testing of the smoke detectors/included each CG at least once per year.

Foster Family Home	**Insurance Requirements**	**[11-800-51]**

51.(a)(2) Automobile; and

Comment:

51.(a)(2)- The CCFFH was missing 10/16/2025-04/16/2026 automobile policy.

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Foster Family Home	Records	[11-800-54]

54.(c)(2)	Client's current individual service plan, and when appropriate, a transportation plan approved by the department;
54.(c)(3)	Current copies of the client's physician's orders;
54.(c)(5)	Medication schedule checklist;
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),54(c)(2) No current service plan present for Client# 2. Last one in record is dated 10/03/2025.

54.(c),54(c)(3) Client# 3, Three medication have orders that do not match the prescription label dosage/directions. (Ketoconazole shampoo, Ketoconazole cream, & Ammonium Lactate cream). Three medications listed on the PRN medication administration record (MAR) had no pharmacy bottles present to confirm orders and bottle labels matched. (Benzonatate, Albuterol HFA, Guaifenesin DM)

54.(c),54(c)(6) Client #1 ADL, VITAL SIGNS, & MAR flowsheets were not documented daily. Sheet not completed from 04/28/2026 to 05/07/2026. Client #2 ADL, VITAL SIGNS, & MAR flowsheets were not documented daily. Sheet not completed from 04/29/2026 to 05/07/2026.
Client #3 ADL, VITAL SIGNS, & MAR flowsheets were not documented daily. Sheet not completed from 04/29/2026 to 05/07/2026.

CTA advised CG#1 to submit an Adverse Event report for all 3 clients regarding not signing ADL/MAR/VITAL SIGNS.

LPN
Compliance Manager

05/07/2026
Date

Primary Care Giver

05/07/2026
Date

CTA RN Compliance Manager: LAURIE VOSLER

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800

PCG's Name on CCFFH Certificate: ROSITA PENEKU
(PLEASE PRINT)

CCFFH Address: 89-210 HUIKALA PLACE WAIANAE HAWAII 96792
(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
46.(a)	Fire drill schedule created	05/27/26	Each CG will conduct at least one fire drill in 12 months.Fire drill will be conducted during days,evenings and nights.CG will include routine fire drill to calendar this will keep all caregivers aware of the fire drill scheduled.Fire drill log to be completed after every drill,log to be filed accordingly.
51.(a)(2)	Automobile policy added to files accordingly	5/27/26	CG will add to calendar scheduled every 16th of the month of April and October to keep track of expiration dates.CG will ensured to files are updated every 6 months and to be filed accordingly.
54.(c)(2)	Updated service plan added to files accordingly	5/27/26	CG will add to calendar scheduled every first of the month of April and October to keep track of expiration dates.CG will ensure files are updated all times,if any changes are made to the current service plan.I will update the record.
54.(c)(3)	Updated clients physicians orders added to files accordingly.	5/27/26	PCG will check that physicians order,bottle label and MAR all match.PCG will ensure clients physicians orders verified updated prescription label dosage directions with pharmacy all times.
54(c)(6)	Updated ADL,Vital Signs and MAR added to files accordingly	5/27/26	CG set alarm daily to complete daily documentation of vital signs ADL and MAR.Documentation to be filed accordingly.

☑ All items that were corrected are attached to this POC

PCG's Signature: Rosita T. Penekus Date: 05/28/26

☑ CTA has reviewed all corrected items