

Foster Family Home - Corrective Action Report

Provider ID: 1-560319

Home Name: Leila Stringer

94-033 Waikele Lp.

Waipahu

HI 96797

Review ID: 1-560319-1

Reviewer: [REDACTED]

Begin Date: 9/24/2015

End Date: 10/14/2015

Foster Family Home Required Certificate [17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6 (d)(1) The NEW Home visit made on 9/24/2015 for a 2-bed certification. Corrective action report issued during the NEW Home visit with corrective action plan due to CTA on 10/8/2015.

6 (d)(1) see applicable sections of this review.

Foster Family Home Background Checks [17-1454-7.1]

7.1.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

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

Comment:

7.1.(a)(1) HHM #2 eCrim last done on 2/2/2013 and no current eCrim present in the Home.

7.1.(a)(2)HHM #1 APS/CAN last done on 2/18/2013 and no current APS/Can present in the Home.

Foster Family Home Personnel and Staffing [17-1454-41]

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(b)(7) CG #1 Current TB clearance not present in the Home.

41.(b)(8) CG #1 Current First Aid renewal not present in the Home.

41.(f)(1) HHM #2 Current TB clearance not present in the Home.

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Foster Family Home

Fiscal Requirements

[17-1454-49.1]

49.1.(a) The home shall have adequate resources to finance its services in accordance with the provisions of this chapter.

Comment:

49.1.(a) No current CCFFH Budget present.



Compliance Manager



Primary Care Giver

9/24/2015

Date

9/24/2015

Date

October 1, 2015

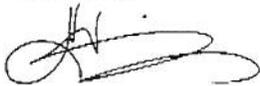
Leila A. Stringer
94-033 Waikele Loop
Waipahu, HI. 96797

Subject: Plan of Correction

The statements made on this Plan of Correction are not an admission to and do not constitute an agreement with the alleged deficiency therein. To remain in compliance with all state regulations, the CCFH has taken or will take the actions set forth in the following plan of correction. The plan of correction constitutes the CCFH's allegation of compliance such that all alleged deficiencies cited have been or will be corrected by the date or dates indicated.

1. 7.1.(a)(1) The home received a current 2015 ECRIM for HHM#2 on September 24, 2015. It is on file in the home personnel record. The home will use a hand written log to track when personnel requirements are due to prevent any requirements from expiring in the future. Attached is a copy of the current 2015 ECRIM for HHM#2.
2. 7.1.(a)(2) The home received a current 2015 APS/CAN for HHM#1 on September 28, 2015. It is on file in the home personnel record. The home will use a hand written log to track when personnel requirements are due to prevent any requirements from expiring in the future. Attached is a copy of the current 2015 APS/CAN for HHM#1.
3. 41.(b)(7) The home received a current 2015 TB Clearance for CG#1 on September 30, 2015. It is on file in the home personnel record. The home will use a hand written log to track when personnel requirements are due to prevent any requirements from expiring in the future. Attached is a copy of the TB Clearance for CG#1.
4. 41.(b)(8) The home has a current 2014-2016 First Aid for CG#1, expires 2016. It is on file in the home personnel record. The home will use a hand written log to track when personnel requirements are due to prevent any requirements from expiring in the future. Attached is a copy of the current 2014-2016 First Aid for CG#1.
5. 41.(f)(1) The home has a current 2015 TB Clearance for HHM#2 on October 2, 2015. It is on file in the home personnel record. The home will use a hand written log to track when personnel requirements are due to prevent any requirements from expiring in the future. Attached is a copy of the current 2015 TB Clearance for HHM#2.
6. 49.1.(a) The home will keep a CCFH Budget form on file and will have enough for all spending. The home will maintain a hand written budget and keep it on file in the home. Attached is a copy of the homes CCFH Budget form.

Sincerely,



Leila A. Stringer