

Foster Family Home - Corrective Action Report

Provider ID: 1-509317

Home Name: Eva Bantolina, CNA

Review ID: 1-509317-3

118 Moa'e Place

Reviewer:

Wahiawa HI 96786

Begin Date: 7/14/2015

End Date: 8/12/15

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

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

Comment:

Visit for 2 client home for recertification made on 07/14/2015. Corrective action plan issued with all applicable sections due by 08/14/2015.

See applicable sections in 6.(d)(1)

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

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)(2) HHM#3 APS/CAN due on or before 10/10/14 was completed on 01/10/15. CG#1 APS/CAN due on or before 07/09/14 was completed on 01/06/15. CG#2 APS/CAN due on or before 07/09/14 was completed on 01/06/15. CG#3 APS/CAN due on or before 07/09/14 was completed on 01/06/15. CG#4 APS/CAN due on or before 08/30/14 was completed on 01/06/15

Foster Family Home Reporting Changes [17-1454-10]

10.(4) In the household composition or structure of the home; and

Comment:

10.(4)CG#1 did not report removal of substitute caregivers x's two and change of 1 HHM

Foster Family Home - Corrective Action Report

Foster Family Home

Personnel and Staffing

[17-1454-41]

41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with subsection 17-1454-7(b)(2).

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.(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.

Comment:

41.(b)(4)CG#4 no disclosure form

41.(b)(7)CG#1 missing 2015 TB, CG#3 missing 2014 TB, CG#4 missing 2014 TB. HHM#1 missing 2013 and 2014 TB

41.(b)(8) CG#1 missing Blood born pathogens from 08/05/2013-12/30/13. CG#4 missing Blood born pathogens from 08/05/2013-10/05/13.

41.(b)(8) CG#4 missing CPR and First aid from 08/05/13-10/05/15

41.(c) CG#4 no Annual training hours for 2014

Foster Family Home

Fire Safety

[17-1454-45]

45.(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:

45.(a) No fire drills on record from January through May 2014

Compliance Manager

[Signature]

Gwa A. Bantolina

Primary Care Giver

Date

7/17/15

Date

7/17/15

Plan of correction.

July 23, 2015

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

17-1454-6 Corrections of all sections will be completed by 8/14/2015.

17-1454-7.1 All adult protective service perpetrator checks completed for Caregiver 1, Caregiver 2, Caregiver 3, and Caregiver 4. All documentation will be kept on file by primary caregiver.

17-1454-10 With decision to end adult foster care home, changes were not reported at time of change. All future changes will be reported, documented, and filed by the primary caregiver.

17-1454-41.b.4 Disclosure form for Caregiver 4 will be obtained, signed, turned in, and kept on file by primary caregiver by 8/14/2015. Forms for all caregivers will be kept on file by primary caregiver to avoid future issues.

17-1454-41.b.7 All current tuberculosis clearance(s) have been updated and meets department of health guidelines for Caregiver 1, Caregiver 2, Caregiver 3, and Caregiver 4. Documentation will be kept by primary caregiver and kept on file.

17-1454-41.b.8 CPR and first aid training updated for all personnel and staffing, including Caregiver 1, Caregiver 2, Caregiver 3, and Caregiver 4. Documentation will be kept by primary caregiver and kept on file.

17-1454-41.c All personnel and staffing including Caregiver 1, Caregiver 2, Caregiver 3, and Caregiver 4 will attend required all in-service training hours. Documentation will be kept by primary caregiver and kept on file.

17-1454-45 With decision to end adult foster care home, documents were not kept. After decision to continue adult foster care home, fire safety drills will be conducted as needed. Records will be kept for two years by primary caregiver.

Name: *Eva A. Santolucina*

Date: *Aug. 10, 2015*