

Foster Family Home - Corrective Action Report

Provider ID: 1-588931

Home Name: Nancy Daproza, CNA

Review ID: 1-588931-3

1326 Hooli Circle

Reviewer:

Pearl City HI 96782

Begin Date: 5/28/2015

End Date: 7/11/2015

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

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

Comment:

6.(d)(1) Home visit made on 5/28/2015 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 6/28/2015.

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

Foster Family Home Information Confidentiality [17-1454-13.1]

13.1.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

13.1.(b)(5)The home did not have confidentiality privacy rights training documented present.

Foster Family Home Medication and Nutrition [17-1454-46]

46.(d)(3) Based on an assessment that includes the consideration of less restrictive restraint alternatives

Comment:

46.(d)(3) Client #1 and Client #2 did not have side rails orders present.

Foster Family Home Physical Environment [17-1454-48]

48.(e) The home shall have policies regarding smoking on the property that:

Comment:

48.(e)The home did not have smoking policy present.

Foster Family Home Quality Assurance [17-1454-48.1]

48.1.(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:

48.1.(a)The home did not have an Emergency Preparedness Plan present.

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Foster Family Home

Client Rights

[17-1454-50]

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

Comment:

50.(b)(15) The home did not have visiting hours policy present.

Compliance Manager

Nancy Dapozza

Primary Care Giver

5/28/2015

Date

5/28/2015

Date

PLAN OF CORRECTION:

JULY 10, 2015

- 13.1.(b)5. The Client's Representative came over at the home to get and sign a copy of the Home Confidentiality Privacy Rights. Dated on June 11, 2015. The home will keep the copy and sign records to the home. So in the future I will make sure before admission or on the day of admission I will provide them a copy.
- 46.(d)(3) The side rails order given and written by the visiting nurse practitioner when visited the home. Dated and sign on June 2, 2015. The home will keep the side rails orders on client's records.
- 48.(e) The home gave a copy to client's Representative on June 11, 2015 on Smoking Policy. The home will provide them before hand in the future. The home will keep a sign and a copy for the smoking Policy Records.
- 48.(1)(a) The home provided a copy to client's Representative on June 11, 2015 an Emergency Preparedness Plan. In the future before admission or on the day of admission the home will provide one for them. The home will keep a sign and a copy for Emergency Preparedness Plan for our records.
- 50.(b)(15) The home provided Visiting Hours Policy. Done and sign on June 11, 2015 by the Client's Representative. In the future I will provide them a copy before or on the day of admission. The home will keep a sign and a copy for visiting hours Policy in our Records.

NANCY DAPROZA
 Nancy Daproza
 1326 Hooli Circle
 Pearl City, HI. 96782

attention: _____