

Foster Family Home - Corrective Action Report

Provider ID: 1-558900

Home Name: Priscila Lana, CNA

Review ID: 1-558900-3

94-1114 Lumikuke Place

Reviewer:

Waipahu HI 96797

Begin Date: 3/30/2015

End Date: 9/17/2015

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

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

Comment:

6.(d)(1)
Review for recertification. Deficiency listed under separate sections. CAP written with all items due by 4/30/15. Fingerprint results for CG 1, 2 and 3 are not present in binder, however record of fingerprinting recorded by CMA in 2004.

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)
No fingerprint in file for HHM 1.
7.1.(a)(2)
CG1, CG2, CG3: APS/CAN skipped a year- was done 10/20/14.
HHM1: No APS/CAN in file.

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)
No confidentiality training.

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

41.(b)(5)(C)(ii) Have a current tuberculosis clearance;

Comment:

41.(b)(5)(C)(ii)
No TB test for HHM1.

Foster Family Home Records [17-1454-52]

52.(b)(1) Permit effective professional review by the case management agency, and the department; and

Comment:

52.(b)(1)
PCG binder [REDACTED] Reviewer. Policies from 2004 present.

[REDACTED SIGNATURE]

Primary Care Giver

10/2/15
Date

April 28, 2015
Date

PCG WRITTEN RESPONSE TO CORRECTIVE ACTION PLAN DEFICIENCIES

(INCLUDE DEFICIENCY NUMBER)

PCG NAME: PRYSCILLA LANA

DATE: APRIL 28, 2015

DEFICIENCY: 6.(d)(1) Fingerprint results for CG1, CG2, CG3 not present in binder.

How did you correct this deficiency? Applied new fingerprinting for CG1, 2 & 3 were done last April 10, 2015. Fingerprinting results are available after 14 days and to be submitted to CTA.

How will you avoid committing this deficiency in the future? Will post a reminder note on my Bulletin board for any incoming due dates.

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

How did you correct this deficiency? HMMI had applied for fingerprint current criminal history checks last April 10, 2015.

How will you avoid committing this deficiency in the future? PCG always check the binder and post reminder on Bulletin board.

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

How did you correct this deficiency? CG1, CG2 and 3 APS/CAN shipped a year was done April 10, 2015 and APS/CAN checks applied together with fingerprinting and also HMMI. Results to be submitted to CTA.

How will you avoid committing this deficiency in the future? To avoid committing this deficiency in the future always check the checklist and update as needed.

PCG WRITTEN RESPONSE TO CORRECTIVE ACTION PLAN DEFICIENCIES

(INCLUDE DEFICIENCY NUMBER)

DEFICIENCY:

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.

How did you correct this deficiency?

Provide copy and attached signatures of all adult employees (confidentiality, do each caregivers).

How will you avoid committing this deficiency in the future?

Will post a reminder on my bulletin board.

DEFICIENCY:

4.(b)(5)(c)(ii) Have a current tuberculosis clearance.

How did you correct this deficiency?

HMM, already applied for TB test on April 20, 2015 and get the results on April 22, 2015.

How will you avoid committing this deficiency in the future?

PCG should always check the binder and post reminder on bulletin board.

DEFICIENCY:

52.(b)(1) Permit effective professional review by the case management agency, and the department.

How did you correct this deficiency?

PCG binder is now completely divided in individual sections for each caregivers.

How will you avoid committing this deficiency in the future?

To avoid committing this deficiency in the future PCG always check the binder.