

Foster Family Home - Corrective Action Report

Provider ID: 5-120068

Home Name: Amy Melchor-Tamayo, RN

Review ID: 5-120068-3

5383 Olopuua Street

Reviewer: [REDACTED]

Kapaa HI 96746

Begin Date: 1/14/2015

End Date: 2/26/15

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. Deficiencies are listed in separate sections. CAP issued with all items to be submitted by 2/14/15.
PCG to remove SCG that is relocating to the Big Island, through the CTA office.

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.a1,2: CG
[REDACTED] must submit results of second fingerprinting. The fingerprinting from [REDACTED] former employer was not done for the CCFFH program.
[REDACTED] 2014 APS/CAN results must be submitted for 2014. Only 2013 was done for the CCFFH program.

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

41.(a)(1) Reside in the community care foster family home;

Comment:

41a1: FA
CG must remove the locks for locking off the clients' section of the home from the family's section of the home.

Foster Family Home Client Care and Services [17-1454-43]

43.(c)(5)(A) Appropriate, safe techniques, and infection control procedures; and

Comment:

43.(c)(5)(A)
CG must remove the locks for locking off the clients' section of the home from the family's section of the home.

Foster Family Home Records [17-1454-52]

52.(c)(1) Client's vital information;

Comment:

52.(c)(1)
NO vital information sheet in client's file.

[REDACTED]
Compliance Manager

Amy Melchor-Tamayo
Primary Care Giver

2/26/15
Date

1/14/2015
Date

CORRECTIVE ACTION PLAN CORRECTIONS

PCG NAME: Amy Melchor-Tanayo

DATE: 2/25/2015

DEFICIENCY:

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

How did you correct this deficiency? PCG removed SCG that is relocating to the Big Island by completing the "Substitute Caregiver Change Notification Form." Form faxed to the CTA office on 2/12/2015.

How will you avoid committing this deficiency in the future? To avoid committing this deficiency in the future, PCG to remove SCG through the CTA office as soon as SCG gives notice of unavailability to work.

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? ^{CG#1} completed appt. for second fingerprinting for CCRFH program on 2/4/2015 but state did not accept it. "Prints too light." Recommended to re-schedule fingerprinting. Got copies of fingerprinting results for

How will you avoid committing this deficiency in the future? CCRFH program done on 1/17/11 & 7/16/12.

To avoid committing this deficiency in the future, employee checklist created. PCG to check checklist at least every four weeks and update as needed.

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

How did you correct this deficiency? APS/CAN checks requested together with fingerprinting on 2/4/2015. Unable to get APS/CAN results due to "CODE" used. Requested APS/CAN checks again on 2/20/2015.

How will you avoid committing this deficiency in the future?

To avoid committing this deficiency in the future, employee checklist created. PCG to check checklist at least every four weeks and update as needed.

DEFICIENCY: 41. (a)(1) Reside in the community care foster family home.

How did you correct this deficiency? PCG removed the locks for locking off the client's section of the home from the family's section of the home by changing the door knob. Photo sent to Compliance Manager [redacted] on 2/12/2015.

How will you avoid committing this deficiency in the future?

To avoid committing this deficiency in the future, PCG to be aware of CCFH rules & regulations.

DEFICIENCY: 43 (c)(5)(A) Appropriate, safe techniques, and infection control procedures

How did you correct this deficiency? PCG removed the locks for locking off the client's section of the home from the family's section of the home by changing the door knob. Photo sent to Compliance Manager [redacted] on 2/12/2015.

How will you avoid committing this deficiency in the future?

To avoid committing this deficiency in the future, PCG to be aware of CCFH rules & regulations.

DEFICIENCY: 52. (c)(1) Client's vital information

How did you correct this deficiency? Requested a copy of client's vital information from Case Management Agency on 01/13/15 and placed in client's file.

How will you avoid committing this deficiency in the future? To avoid committing this deficiency in the future, purge client's chart and leave only at least 1 1/2 years of client's information. If client's chart too thick, possibility some sheets will fall off.

DEFICIENCY:

How did you correct this deficiency?

How will you avoid committing this deficiency in the future?