

Foster Family Home - Corrective Action Report

Provider ID: 1-514910

Home Name: Castora Dela Cruz, CNA

Review ID: 1-514910-4

56-415 Pahelehala Loop

Reviewer:

Kahuku HI 96731

Begin Date: 11/4/2015

End Date: 12/17/2015

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

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

Comment:

6 (d)(1) Home visit made on 11/4/2015 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 12/4/2015.

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

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

41.(b)(2) Have no physical or mental disabilities that would prevent their being able to meet the daily needs of clients on a twenty-four basis;

41.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

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

Comment:

41.(b)(2) The SCG Disclosure Form for CG#3 and CG#4 not present.

41.(e) The CTA Approval Form for CG#4 not present.

41.(f)(1) TB Skin Test Clearance for HHM#3 expired on 4/12/2015 and current TB skin test not present.

Foster Family Home Records [17-1454-52]

52.(c)(8) Personal inventory.

Comment:

52.(c)(8) The Personal Inventory of Client #1's belongings not present in the record or in the home.



Compliance Manager

Primary Care Giver

Date

Date

11/4/2015

11/4/2015

WRITTEN PLAN OF CORRECTION
Dec. 17, 2015

The following Documents, as a Plan of Correction, are already filed at all times on my Foster Home Binder and faxed to CTA.

41.9(b)(2). The SCG Disclosure Form for CG #3 and CG #4, are filed on my Foster Home Binder at all times.

41. (e) The CTA Approval Form for CG # 4 is now filed on my Home Binder at all times.

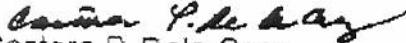
41. (f)(1) TB Skin Test clearance for HHM #3 is now filed on my Home Binder at all times.

Foster Family Home Records.

52. (0)(8). Personal Inventory of Client # 1 Belongings is now filed on Client #1 Home Binder, at all times.

Copy of Tractable Plan is also filed in the Foster Home Binder.

Date: Dec. 17, 2015


Castora P. Dela Cruz
66-415, Pahelenala Loop
Kahuku Hawaii, 96731

