

Foster Family Home - Corrective Action Report

Provider ID: 1-100106

Home Name: Helen Claveria, NA

Review ID: 1-100106-4

94-1261 Huakai Street

Reviewer:

Waipahu HI 96797

Begin Date: 9/9/2015

End Date: 9/24/15

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

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

Comment:

Home recertification appointment made on 09/09/2015 for 2 client recertification. Corrective action report issued see applicable sections 6.(d)(1). Corrective action plan due by 10/09/2015

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;

Comment:

7.1.(a)(1) CG#2 no exemption form for date 7/10/13. CG needs an exemption form.

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

41.(h) The primary caregiver shall ensure that all substitute caregivers are approved by the department prior to providing services and shall provide a verbal and written report of all substitute caregiver changes, including additions, terminations and replacements, to the department.

41.(i) The primary caregiver shall notify the department of any dependent household members or changes in household composition.

Comment:

41.(h) CG#1 did not report removal of SCG#3, and 4 until recertification appointment 09/09/15

41.(i) CG#1 did not report removal of HHM#5, and 6 until recertification appointment 09/09/2015

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) Only CG#1 lead fire drills in 2014. All CG's are required to lead a fire drill at least once a year

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:

45.(a) No emergency preparedness plan in record

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Foster Family Home

Records

[17-1454-52]

- 52.(c)(1) Client's vital information;
- 52.(c)(4) Client's emergency management procedures;
- 52.(c)(5) Medication schedule checklist;
- 52.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

52.(c)(1) Client #2 Face sheet does not show client's code status and marked POLST on record, no POLST in record during recertification. Do not know if client is responsible for self or has POA

52.(c)(5) Client #1 Seroquel on MAR not signed for by CG for the month of September. Client#1 Dr's order for No medication available at time of recertification.

52.(c)(4) Client#2 no client specific emergency procedure in record

52.(c)(6) No R.N visits in clients record.



Compliance Manager

HELEN CLAVERIA

Primary Care Giver

Date

9/09/15

Date

9.9.15

9/9/2015 15:58 PM

Foster Family Home – Corrective Action Report
Provider ID 1-100106
Home Name: Helen Claveria, NA
94-1261 Huakai St.
Waipahu, HI 96797
9/23/15

Citations:

7.1.(a)(1) – CG#2 exemption form for date 7/10/13 is still in the process of completion. Actions has already been made by getting another fingerprint which was done on 9/23/2015 12:00 PM. Contacted fieldprint Hawaii and they stated that they were unable to give an exemption form and the only way to get an exemption form is to redo fingerprinting since last fingerprint was done in 2014. It will take 2 weeks from the date 9/23/15 to get the e-mailed results and from there we can go on to complete the exemption form. What I can do to prevent this from happening again is to pay more attention to detail and take action of anything that needs to been done as soon as possible.

41.(h) CG#1 – For this citation I did not report removal of SCG #3 and 4 until my recertification appointment on September 9, 2015. I did fix it on that day of September 9, 2015 by signing the removal form. I'm able to prevent this from happening again by being more aware of my doings and if this circumstance was to happen again I will definitely report any changes immediately.

41.(i) CG#1 I did not report the removal of HHM #5 and 6 until my recertification appointment on September 9, 2015. I strongly apologize for not being up to date by reporting any changes and from now on to prevent this from happening again I will report every single change immediately to avoid another citation for my next recertification. I already took action by making a checklist of every important detail I have to do and report.

45.(a) In 2014 CG #1 only lead the fire drill. I understand that all CG's are required to lead a fire drill at least once a year. I will take further action by having SCG #2 lead the fire drill on October 10, 2015 and have SCG #5 lead the fire drill on November 10, 2015. The dates are already noted down in my calendar for SCG #2 and SCG #5 to lead the fire drill. From now on I will do as I said to prevent this citation from happening again.

48(a) There was no emergency preparedness plan in record. I did print out the form on comties.com and put the form in my binder. It is now in record as of September 9, 2015. To prevent this issue from happening again I need to always pay attention to detail, and look back at my checklist periodically to make sure everything is up to date.

52.(c)(1) Client #2 Face sheet has been updated and corrected from my case manager. My client's POLST has been faxed to me from _____ To prevent this from happening again I

will make sure to always touch bases with my case manager and Client #2's Doctor, to have the face sheet updated at all times to have client's code status and marked POLST in record and be kept in the binder.

52.(c)(5) Client #1 on MAR not signed for month of September. From now on I'll always make sure to sign when giving medication by always having MAR out and ready to be signed before giving the medication. For client #1 I received a fax from on 9/23/2015 and he decided to discontinue RX prn on 9/15/2015.

52.(c)(4) Client #2 The specific emergency procedure was given to me by my case manager on 9/22/2015. I'm aware now that the specific emergency procedure is very important and should be always kept in record. To prevent this from happening again I will make sure to check my binder periodically to ensure that the emergency procedure form is kept there intact and not missing.

52.(c)(6) No RN visits in client's record – On September 22, 2015 my case manager came to drop off the documents needed for RN assessment on August 2014. Last RN visit was on August 2015. The RN's agency is From now on I will always remember to keep record of all RN visits as I understand how important it is to keep every single detail on record. To prevent this from happening again I will not forget to take note of every RN visit and will immediately write down date and time of visit in client's record.

Primary CARE GIVER
X Helena Claveria