

# Foster Family Home - Corrective Action Report

Provider ID: 1-560541

Home Name: Luz Ruiz, CNA

Review ID: 1-560541-3

94-465 Pilimai Street A

Reviewer:

Waipahu HI 96797

Begin Date: 9/17/2015

End Date: 10/16/15

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

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

Comment:

Home visit for a 3 person ~~environmental review~~ made on 9/17/15.

Corrective Action Report issued during home visit with a written plan of correction due to CTA by 10/17/15.

6.(d)(1) - see applicable sections of the review

## 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) CG#3 no fingerprints on file. HHM#3 only one set of fingerprints on file second set due by 09/12/15.

7.1.(a)(2) CG#1 APS/ CAN due on or before 03/08/14 completed on 09/10/14. CG#3 APS/ CAN due on or before 08/22/13 completed on 09/10/14. CG#6 APS/ CAN due on or before 09/10/15 not completed yet. HHM#3 APS/ CAN due on or before 09/12/15. Not completed yet.

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

- 41.(a)(3) Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and
- 41.(b)(7) Have a current tuberculosis clearance that meets department of health guidelines; and
- 41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.
- 41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.
- 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.

Comment:

- 41.(a)(3) No job experience forms in record for CG#1,2,3,4,5,6
- 41.(b)(7) CG#3 no T.B record for 2013 or 2014. HHM#3 no T.B record for 2014
- 41.(b)(8) CG#1 lapse in BBP form 08/21/14-09/12/14, CG#4 lapse in BBP form 09/30/13-02/1/14, CG#6 lapse in BBP from 09/30/13-08/20/14
- 41.(b)(8) CG#6 lapse in CPR and first aid from 09/30/13-11/15/14
- 41.(c) CG#3 no annual inservice hours for 2013 and only 2 for 2014 for CG#3, and CG#4
- 41.(e) CG#3, and CG#5 no CTA approval form or add form in record

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

- 46.(b) The caregivers shall obtain training, relevant information, and regular monitoring from the client's physician, a home health agency, as defined in chapter 11-97, HAR, or an RN for all medication that the client requires.

Comment:

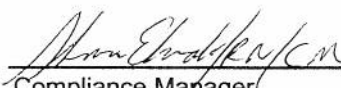
- 46.(b) ~~Client #2 no updated skills training for CG# 2,3,4. Was due 3/31/15~~ error SE

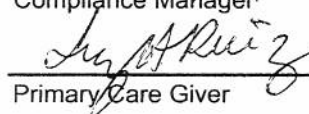
**Foster Family Home**      **Records**      **[17-1454-52]**

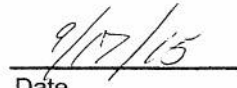
- 52.(c)(1) Client's vital information;
- 52.(c)(5) Medication schedule checklist;

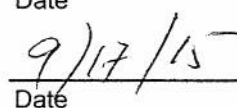
Comment:

- 52.(c)(1) Client #2 no code status on face sheet
- 52.(c)(5) Client #3      times everyday, label on bottle reads  
time a day. Needs clarified.

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date



**From:** Luz Ruiz  
**Sent:** Wednesday, October 14, 2015 11:18 AM  
**To:**  
**Subject:** Luz Ruiz (CAP) Fix (7.1.a.2) (41.b.7) And (52.c.5)

**Luz Ruiz corrective Action Plan.**

41.(a)(3) CG#1,2,3,4,5,6 Job experienced forms are placed in old files.

**How to prevent from happening again.**

Will make sure to put in records in the new files and in orders and ready to review upon rectification.

41.(b)(7) CG#3 T.B test is already complete and on file in old records. CG#3 Current credentials must be on file before expiration date.

**How to prevent from happening again.**

I will make sure that T.B test documents must be updated on before do, and must place a notice on calendar for renewal notice. And will not happen again.

41.(b)(8) CG#1 BBP lapse from 08/21/14 - 09/12/14 CG#4 lapse in BBP from 09/30/13, CG#6 lapse in BBP from 09/30/13 - 08/20/14. CG#1,4,6 New credentials already in file.

**How to prevent from happening again.**

Must have all credentials organized in files and must ready to review upon rectification.

41.(b)(8) CG#6 lapse in CPR and First aid from 09/30/13 - 11/15/14. CG#6 CPR and First aid are attach in old file.

**How to prevent from happening again.**

I will make sure that all new updated credentials must be attach in records and be filed, ready to view upon rectification. And won't happen again.

41.(c) CG#3 No annual in service hours for 2013 and only two for 2014 for CH#3 and CG#4. Upon hire all CG must have all requirements and must be attach on file records.

**How to prevent from happening again.**

I will make sure that all CG have all current credentials upon hire. And must follow up on all CG for renewal by placing at least 60 days notice before do, So it won't happen again.

41.(e) CG#3 and CG#5 No CTA approval form in records. CG#3,5 already have sent to CTA forms.

**How to prevent from happening again.**

Approvals forms must be on file and ready to review upon rectifications.

52.(c)(1) Client #2 Already send to agency and have records in file.

52.(c)(5) Walgreens Pharmacy updated medication labels for Client #3 has been filled and dispensed to the patient.

**How to prevent from happening again.**

Will make sure that all medications must be clarified on labels before given dose. And must match with Drs. orders.

7.1.(a)(1) CG#3 Fingerprint already done and is in old file. HHM#3 fingerprint already done from 09/12/13

**How to prevent from happening again.**

Will make sure that all current credentials must be placed in file for records and must be ready to view upon re certifications.

**7.1.(a)(2)** CG#1 APS/CAN already done completed from 09/10/14. CG#3APS/CAN already done and completed on 09/10/14. CG#6 APS/CAN already completed on 09/10/15. HHM#3 needed to add and already done. CG#1,3 and All current credentials are placed in old files.

**How to prevent from happening again.**

Will make sure that HHM#3 be added in records and must be filled ready to be review upon rectification. CG current credentials must be placed on new files for records at all times and must be ready to view upon rectifications.

**Electronically Signed By:** *Luz A Ruiz*

**Date:** 10/09/15