

Foster Family Home - Corrective Action Report

Provider ID: 1-564444

Home Name: Milagros Duropan, CNA

Review ID: 1-564444-4

87-170 Maipela St

Reviewer:

Waianae HI 96792

Begin Date: 10/23/2015

End Date:

12/17/15

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

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

Comment:

1-564444 In home survey for recertification of two client CCFH 10/23/2015. Corrective Action Report issued with Corrective Action Plan due to CTA no later than 11/23/2015.

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;

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)
HHM 2 is a new HHM and needs to be fingerprinted.

7.1.(a)(2)
HHM2 is a new HHM and need the APS/CAN report.

Foster Family Home Reporting Changes [17-1454-10]

10.(4) In the household composition or structure of the home; and

Comment:

10.(4)
New HHM has not been reported to CTA.

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)
Confidentialiy Training Form is present in file, but none of the HHMs or CGs have been trained.

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Foster Family Home

Personnel and Staffing

[17-1454-41]

(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with subsection 17-1454-7(b)(2).

(b)(7) Have a current tuberculosis clearance that meets department of health guidelines; and

Comment:

1. (b)(7)

2: No proof of positive TB testing in file.

M 2 : NO record of TB testing in file.

(b)(4)

2 and CG 3: No Disclosure Forms in files.

Foster Family Home

Insurance Requirements

[17-1454-49]

(a)(2) Automobile; and

Comment:

(a)(2)

2: CG 2 is driving clients but no Declarations Sheet in file to prove amount of coverage.



Compliance Manager

Milagros A. Durópan

Primary Care Giver

12/17/15
Date

12/17/2015
Date

Milagros Duropan
87-170 Maipela St. Waianae HI, 96792

12/10/15

1.

Fixed – Got Declaration of car insurance.
-Got CCFH substitute adult & household member training
declaration form.
-TB clearance acquired immediately.

How To Prevent – Get required documents as soon as possible every time it
is renewed.
-Send paper work to sunny only for TB & background
check.

2.

Fixed – Got CCFH substitute adult & household member training
declaration form.
-Got Declaration sheet put in book.

How To Prevent – Get done every time it is renewed

3.

Fixed – Got Finger print
-TB Clearance obtained
-Background check received

How To Prevent – Get required documents every time it is renewed.
- Send Paper work to [REDACTED] only for the TB clearance &
background check

Milagros A. Duropan
MADuropan
12/11/15