

# Foster Family Home - Corrective Action Report

Provider ID: 1-130059

Home Name: Rosalina Mendoza, CNA

94-144 Kaaholo Place

Waipahu HI 96797

Review ID: 1-130059-3

Reviewer:

Begin Date: 10/27/2015

End Date: 11/12/15

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

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

Comment:

Recertification and change from 2 client to 3 client visit on 10/27/2015. Corrective action report issued at time of visit. Due on 11/27/15. See applicable sections 6.(d)(1)

## Foster Family Home Background Checks [17-1454-7.1]

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)(2)CG#5 APS/CAN due on or before 7/26/15 completed on 09/02/15.

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(8) CG#2 no First aid from 10/28/14 to current. CG#5 lapse in blood born pathogens from 7/25/15-9/10/15

## 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) CG#2 did not lead fire drill in 2014

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

52.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

52.(c)(5) Medication schedule checklist;

Comment:

52.(c)(2)Client#1 service plan is not signed by POA or client.

52.(c)(5)Client#1 Dr. order for by mouth in AM, label on prescription bottle says by mouth every day. Needs clarified.

Compliance Manager

*Rosalina Mendoza*  
Primary Care Giver

Date

10/27/15

Date

10/27/15

Corrective Action Plan

7.1 (a) (2) CG#5 APS/CAN was completed late but is current now.

\* To ensure that this not happen again, I will place on calendar 60 days before due.

41.(b) (8) CG#2 First Aid was completed late but is current now.

CG#5 Blood Borne Pathogen was completed late but is current now.

\*To prevent this from happening again, I will create a list on my calendar to ensure this will be completed in a timely manner before due date.

45. (a) CG#2 include her in fire drill.

\*To ensure that this not occur again make sure all caregivers do fire drill every month.

52.(c) (2) Client #1 Service Plan signed by POA 11/03/15

\*To ensure that this not happen again, i will make sure that all documents must be sign.

52.(c) (5) Client #1 Dr ordered for  
on prescription bottle says



by mouth in AM, label  
by mouth everyday.

\* I contacted the doctor and pharmacy last 10/28/15 about the drug and its was completed now. To prevent this from happening again i will make sure to check doctor ordered and compare medicine label when refilling to pharmacy.

*Rosalina P. Mendoza*  
Rosalina P. Mendoza  
Primary Caregiver