

# Foster Family Home - Corrective Action Report

Provider ID: 1-150029

Home Name: Joni-Lyne April Nocolas  
Danao, CNA

Review ID: 1-150029-1

94-1145 Keahua Lp.

Reviewer:

Waipahu HI 96797

Begin Date: 6/17/2015

End Date:

7/1/15

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

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

Comment:

6.d.1 Survey performed for a 2 bed new application on 6/17/15. A corrective action report was issued during the home visit with a written plan of correction due to CTA by 7/1/15. See applicable sections of this report.

## 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 No fingerprint results present for CC [REDACTED]

7.1.a.2 No second CAN check present for CC [REDACTED] two CAN checks should be on file, one on file is from 2014.

## Foster Family Home Physical Environment [17-1454-48]

48.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

48.(b)(1) Have a bedside curtain or screen to ensure privacy when a room is shared by the client and another person;

Comment:

48.a.4 Bathroom shower and tub are not currently ~~not~~ wheelchair accessible.

48.b.1 No privacy screen present for shared client room.

Compliance Manager

Primary Care Giver

6/17/15  
Date

6/17/2015  
Date

June 29, 2015

6.d.1 The home received an a corrective action report for the survey that was performed on 6/17/15. The home complied with all applicable requirements in this chapter. The home will ensure that all requirements are met before any survey and meet all due dates.

7.1.a.1 The home received fingerprint results for Caregiver [REDACTED]. It is on file in the home personnel record. In the future the home will have a computer program to track when personnel requirements are due and up to date with required documents and fingerprint results. The home will ensure that copies of required documents and fingerprint results are kept in file. Attached is the fingerprint results for CG [REDACTED].

7.1.a.2 The home received a second CAN check for Caregiver [REDACTED]. The primary caregiver currently has the first CAN on file from 2014 and a copy of the second CAN check for 2015 is now in file. The home will have a computer program to track when personnel requirements are due and are up to date with required documents and CAN checks. The home will ensure that copies of required documents and CAN checks are kept in file. Attached is the second CAN check for CG [REDACTED].

48.a.4 The home bathroom shower for the client's bedroom was not wheelchair accessible. To accommodate for the wheelchair accessibility, the shower door was removed to create more space and a shower curtain was placed in. In the future, the home will ensure that bathrooms and bedrooms are accommodating to wheelchair accessibility. The home will ensure that all physical environment requirements are prepared for any survey. Attached is a photo of the new shower entrance with a shower curtain.

48.b.1 During the home survey received on 6/17/15, the shared client room had no privacy screen. A privacy screen was placed in the shared client room for privacy. The home will ensure that the shared client room has a privacy divider. Attached is a photo of the privacy screen in the shared client room.

[REDACTED] 6/29/2015

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