

# Foster Family Home - Corrective Action Report

Provider ID: 1-580234

Home Name: Leonora Antonio, CNA

Review ID: 1-580234-3

4-1075 Puloku Street

Reviewer: :

Waipahu HI 96797

Begin Date: 12/2/2015

End Date:

1/28/16

## Foster Family Home

## Required Certificate

[17-1454-6]

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

Comment:

Re-certification visit for 3 client home on 12/02/15. Corrective action report issued during visit, due by 1/02/15. See applicable sections 6.(d)(1).

## 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 did not lead a fire drill in 2014

## Foster Family Home

## Medication and Nutrition

[17-1454-46]

4 6.(d)(1) By order of a physician;

Comment:

4 6.(d)(1) Client no order for :

## Foster Family Home

## Client Account

[17-1454-47]

47.(a) The home shall maintain a written accounting of the client's personal funds received and expended on the client's behalf by the home.

Comment:

47.(a) Statement of financial accountability is marked caregiver is responsible, no client account record present during review.

# Foster Family Home - Corrective Action Report

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)(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)(2) Client [redacted] service plan last updated 3/10/15, to be in compliance should have been updated by 9/10/15. Client [redacted] written on service plan

52.(c)(4) Client [redacted] no specific emergency procedures in record.

52.(c)(5) Client [redacted] and [redacted] no Medication record for the month of December. Client [redacted] Dr order for [redacted] MAR for November reads [redacted] Dr order for [redacted] Bottle reads [redacted] Dr order for [redacted], on the [redacted]

medication record this order is written in two places both to be given at 8 a.m and is being signed out in both locations, appears this medication is being given [redacted] Orders need clarified.

52.(c)(6) Client [redacted] no personal inventory in record

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

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

12/02/15  
Date

12/02/15  
Date

45.(a) CC [redacted] - PCG went over the fire drill with SCG and [redacted] will be able to lead a fire drill. SCG will conduct one fire drill during the month of February. To prevent this from happening again, PCG will schedule all caregivers in conducting fire drills.

46.(d) (1) Client [redacted] - MD order for [redacted] received from Physician. To prevent this from happening again, PCG will ensure that there is a MD Orders on file for all client with s [redacted] in their records and will not remove order and make sure service plan is up to date.

47.(a) Client [redacted] - Statement of Account for client [redacted] changed to client is responsible. To prevent from happening again, PCG will review the Contract for Services to ensure that a designated family member has acknowledged their responsibility.

52.(c) Client #s - CMA updated Service Plan and corrected - 09/09/2015 & 12/08/2015 [redacted]  
[redacted] To prevent this from happening again, PCG will review with the Case Manager monthly to ensure all changes are updated correctly.

52.(c)(4) Client [redacted] Received Emergency Protocols from AICMC & updated to client's chart. To prevent this from happening again, PCG will make sure that during admission's of a client, PCG will review chart for accuracy and report to the CMA any missing documents.

52.(c)(5) Client [redacted] - Client [redacted] & Client [redacted] Medication record for December updated to client's chart & correct. Client [redacted] medications corrected and now the Medication record, labels on the bottle, and Dr's order match. To prevent from happening again, PCG will review the MAR for accuracy monthly against, the labels on the bottle and the MD Orders received.

52.(c)(6) Client [redacted] - Personal Inventory completed - To prevent this error from happening again, CCFH will provide accurate personal belongs and update to the inventory form as changes occurs.

I am providing your office with my "revised" Corrective Action Plan.

[redacted]  
Leonora Antonio, PCG

1/28/16  
Date