

Foster Family Home - Corrective Action Report

Provider ID: 1-579576

Home Name: Luz Vea, CNA

Review ID: 1-579576-3

1582 Hoonipo Street

Reviewer:

Pearl City

HI 96782

Begin Date: 12/29/2015

End Date: 2/23/16

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

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

Comment:

Home survey for recertification of two client CCFFH conducted 12/29/2015. Corrective Action Report issued with all deficiencies to be met by 1/29/2016.

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

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41 (f)(1)HHM No TB test results in file.
CG TB test from 11/2012 is negative and no other TB test results are in file.

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

48.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

48.(c)(3)
Shower chair has built on dirt on it.

Compliance Manager

Primary Care Giver

Date

1/18/16
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FOSTER FAMILY HOME -CORRECTIVE ACTION REPORT
LUZ A. VEA, CAN

Foster Family Home Personnel and Staffmg (17 -1454-41)

41, (t)(1) Tuberculosis Clearances that meet department of health guidelines.

Comment:

41.(t)(1)HHM [REDACTED] No TB test in file.

Got TB record and put in file. Keep results in file

CG [REDACTED] TB test from 11120/12 is negative and no other test results are in file.

Got TB record and put in file. Keep results in file.

Foster Family Home Physical Environment (17 -1454-48)

48©(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

48.(c)(3) Shower chair has built on dirt on it.

Shower Chair was cleaned. Pictures sent to CTA. (AE)

I will make sure to clean each use to maintain cleanliness.

Name: Luz A. Vea, CAN

Address: 1582 Hoonipo Street, Pearl City, HI 96782

Date: 1/18/16

Signature: