

Foster Family Home - Corrective Action Report

Provider ID: 1-150027

Home Name: Anthony Castillo, CNA

Review ID: 1-150027-2

14-339 Waipahu St.

Reviewer:

Waipahu HI 96797

Begin Date: 6/1/2016

End Date: 6/29/16

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

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

Comment:

Home visit for a 2 person recertification review [REDACTED]
Corrective Action Report issued during home visit with all items due to CTA [REDACTED]

§.d)(1) - see applicable sections of the review

Foster Family Home Fire Safety [17-1454-45]

§.5(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:

§.5(a) - No record of conducted fire drills.

Foster Family Home Fiscal Requirements [17-1454-49.1]

§.9.1(c) All fiscal related material shall be maintained by the home in accordance with generally accepted accounting principles, in form conducive to sound and efficient fiscal management and audit.

Comment:

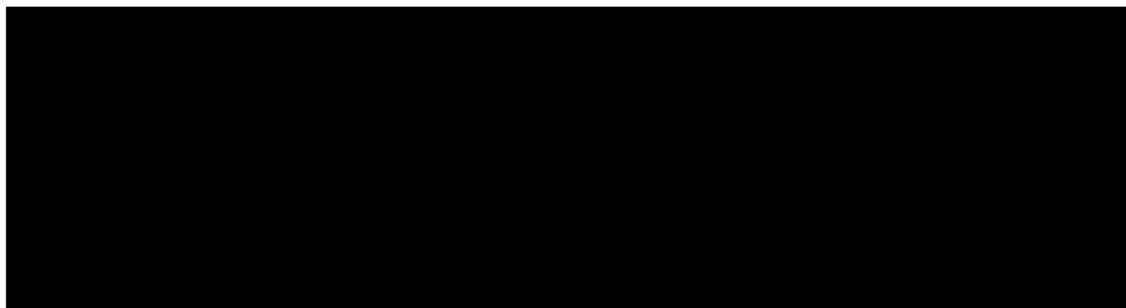
§.9.1(c) - No financial records being maintained.

Foster Family Home Records [17-1454-52]

§.2(c)(5) Medication schedule checklist;

Comment:

§.2(c)(5) - For client [REDACTED] CMA has not added new medications to the MAR.



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Waipahu, HI 96797

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Begin Date: 6/1/2016

45. (a) - Sent CTA a fire drill log showing that I conducted a fire drill [REDACTED]

49.1.(c) - Sent CTA a printed monthly budget for my CCFFH [REDACTED]

52.(c)(5) - Requested to agency to correct/update MAR for client [REDACTED]

I will keep a monthly log for fire drill and a monthly budget for my CCFFH as long as I continue to operate my business. I will also make sure that my clients MAR's are up to date every month.

