

Foster Family Home - Corrective Action Report

Provider ID: 1-580888

Home Name: Azucena Luiz, CNA

Review ID: 1-580888-3

91-414 Papi Drive

Reviewer:

Ewa Beach HI 96706

Begin Date: 7/21/2016

End Date: 8/5/16

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

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

Comment:

6 (d)(1) Home visit [redacted] for a 3-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA [redacted]

6 (d)(1) see applicable sections of this review.

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#1 and CG#2 Adult Protective Services, Child, Abuse, and Neglect (APS/CAN) checks expired [redacted] but renewed [redacted] with about 5 months lapse. CG#3 APS/CAN expired [redacted] but renewed [redacted] with about 4 days lapse.

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

41.(a)(3) Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and

Comment:

41.(a)(3) CG#3 Job experience not present in the home.

Compliance Manager

Primary Care Giver

Date

Date

WRITTEN PLAN OF CORRECTION

7/24/16

7.1 (a)(2) CG#1, CG#2 and CG#3 will not lapse in the future again. The home will use cell phone calendar to remind CGs to meet all requirements before due date.

4.1(a)(3) CG#3 now completed job experience [redacted] and it is now placed in the home binder permanently. Therefore, this will not happen in the future.

7/24/16 Amana Pae of Pae
91-416 Pae Drive
Ewa Beach, Hawaii 96706