

# Foster Family Home - Corrective Action Report

Provider ID: 1-150022

Home Name: Ester Nones, NA

Review ID: 1-150022-2

6252A Ibis Avenue

Reviewer:

Ewa Beach HI 96706

Begin Date: 3/23/2016

End Date: 3/24/16

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

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

Comment:

Home visit for a 1 person recertification review [REDACTED] Corrective Action Report issued during home visit with all items due to CTA [REDACTED]

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

## 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:

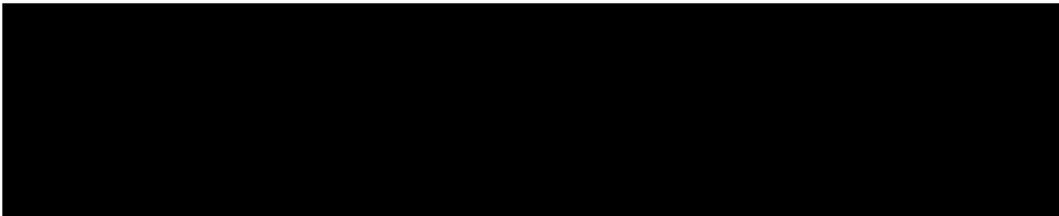
7.1.(a)(1),(2) - Second APS/CAN/FP not done [REDACTED]

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

41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with subsection 17-1454-7(b)(2).

Comment:

41.(b)(4) - No disclosure form present for CG [REDACTED]



7.1. (a) (1) & (2) - Showed C.T.A. RN current  
APS/CAN/FP on the day on  
[REDACTED] recertification [REDACTED].

41.(b)(4) - Sent C.T.A. a current disclosure  
form for C.G. [REDACTED]

I have placed all items with  
expiration dates on my cellphone  
calendar. I will make sure  
all C.G.'s will fill out a disclosure  
form as stated in rule 41(b)(4).

