

Foster Family Home - Corrective Action Report

Provider ID: 1-518441

Home Name: Franco Estabillo, CNA

94-483 Hoaeae Street

Waipahu

HI 96797

Review ID: 1-518441-4

Reviewer:

Begin Date: 7/1/2016

End Date:

7/3/2016

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 [REDACTED] Adult Protective Services and Child, Abuse, Neglect (APS/CAN) checks [REDACTED] but renewed [REDACTED] with about 4 days lapse.

Foster Family Home

Personnel and Staffing

[17-1454-41]

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(8) CG [REDACTED] CPR and First Aid certificate expired [REDACTED] but renewed [REDACTED] with about 12 days lapse.

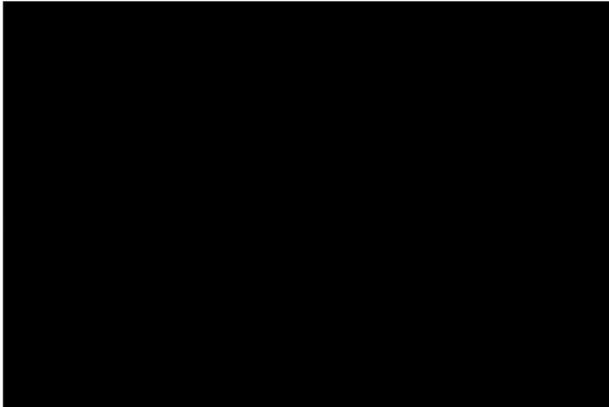
WRITTEN PLAN OF CORRECTION



7.1.(a)(2) CG [REDACTED] WILL NOT LAPSE APS-
CAN
AGAIN IN THE FUTURE BECAUSE THE HOME WILL
USE A SPECIAL REMINDER CALENDAR FOR ALL
REQUIREMENTS BEFORE DUE DATE.

4.1.(b)(8)

CG [REDACTED] WILL NOT LAPSE IN CPR AND FIRST AID
AGAIN IN THE FUTURE BECAUSE THE HOME
WILL USE A SPECIAL REMINDER CALENDAR
FOR ALL REQUIREMENTS BEFORE DUE DATE.



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