

# Foster Family Home - Corrective Action Report

Provider ID: 1-513186

Home Name: Luzviminda Padilla, CNA

Review ID: 1-513186-4

92-745 Paala Loop

Reviewer:

Kapolei

HI 96707

Begin Date: 6/30/2016

End Date: 8/1/2016

## 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 made on 6/30/2016 for a 2-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)(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) HHM#2 and HHM#5 Fingerprinting records not present in the home.

7.1.(a)(2) CG#1 and CG#2 Adult Protective Services and Child, Abuse, Neglect checks expired [REDACTED] but renewed [REDACTED] with about 5 days laps. CG#3 and HHM#2 Adult Protective Services and Child, Abuse, Neglect checks expired [REDACTED] but renewed [REDACTED] with about 6 weeks lapse.

## 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#2 TB clearance [REDACTED] expired [REDACTED] but renewed [REDACTED] with about 2 weeks lapse. HHM#4 and HHM#5 TB clearance not present in the home.

Compliance Manager

*Luzviminda Padilla*

Primary Care Giver

Date

*6-30-2016*

Date

Written Plan of Correction

August 1, 2016

The statements made on this plan of correction are not an admission to and do not constitute an agreement with the alleged deficiencies therein. To remain in compliance with all State regulations, the CCFH has taken or will take the actions set forth in the following plan of correction. The plan of correction constitutes the CCFH's allegation of compliance such that all alleged deficiencies cited have been or will be corrected by the date or dates indicated.

7.1(a)(1) HHM#2 completed the 1st set of fingerprinting [REDACTED] and HHM#5 have completed the 2nd sets of fingerprinting [REDACTED] and now filed in the binder permanently. The home will use a calendar to track before due dates so this will not happen again.

7.1(a)(2) CG#1, CG#2, CG#3 and HHM#2 will not lapse for adult protective service, child, abuse, and neglect checks. The home now uses special calendar for all requirements before due dates to prevent this happening again in the future.

41.(f)(1) HHM#2 TB clearance will not lapse because the home uses a tracking calendar to prevent from expiring again in the future. HHM#4 and HHM#5 have completed the TB Clearance [REDACTED] respectively and now filed in the home binder. The home has calendar log to prevent from expiring again in the future.

August 1, 2016

Signature



Luzviminda Padilla, CNA

92-745 Paala Loop

Kapolei, HI 9707

