

Foster Family Home - Corrective Action Report

Provider ID: 1-110049

Home Name: Rowena Bautista, NA

94-1309 Henokea Street

Waipahu HI 96797

Review ID: 1-110049-6

Reviewer:

Begin Date: 3/29/2016

End Date:

4/15/16

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

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

Comment:

6.(d)(1) Refer to appropriate sections of this review.

Home visit [REDACTED] A corrective action report was issued at time of visit with deficiencies to be met [REDACTED]

Foster Family Home Application [17-1454-7]

7.(b)(1)(C) Background check documents, as provided in section 17-1454-7.1; and

Comment:

7.(b)(1)(C) Missing APS/CAN for CG #1 [REDACTED]

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) Missing State Printout E-crim due for HHM #2 [REDACTED]

7.1.(a)(2) Missing APS/CAN for HHM #1 [REDACTED]

Missing APS/CAN [REDACTED] for HHM #3 and CG #1

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) Missing current TB clearance symptom list for CG #3 [REDACTED]

Compliance Manager

R. Bautista

Primary Care Giver

Date

3/29/16

Date

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Waipahu, Hawaii 96797

Foster Family Home E-crim

7.1. (a)(1)

HHM #2

E-crim was done [REDACTED] result was on my file binder. Furthermore I ordered again another one for this year [REDACTED]. Sending both copy to CTA and originals on my binder. In the future I always check and make sure every month when I do my fire drill I will also check all my necessary paperwork when its due to avoid this for happening again. I will make sure that I have all the necessary complete paperwork in accordance to the company policy as well as to all my requirements to have a foster care home.

Foster Family Home Background Checks

7. (b)(1)(C)

CG #1

7.1. (a)(2)

HHM #1, HHM #2, CG #2

Provided all APS/CAN result [REDACTED] myself, my substitute as well as my two household members. In the future I will make sure to always check every month all the necessary papers to prevent any requirement from expiring in the future.

Foster Family Home Personnel and Staffing

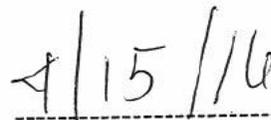
4.1. (f)(1)

CG #3

The home received a current TB clearance. It is on file in the home personnel record. I will check every month when I do my fire drill to track when it's due to prevent from expiring.



Rowena L. Bautista, Primary Care Giver



Date: