

# Foster Family Home - Corrective Action Report

Provider ID: 4-100031

Home Name: Mineriza Pascua, CNA

74 Puukani Street

Kahului HI 96732

Review ID: 4-100031-5

Reviewer: Cymbree Haitsuka

Begin Date: 4/9/2015

End Date:

4/28/15

## 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. No second fingerprint for CG #1. Fingerprint 1/31/12 found in file.

7.1.a.2. No 2014 APS/CAN check for CG #1 and CG #3. CG #1 APS/CAN check lapsed; due 2/26/14 and done 1/8/15. CG #3 APS/CAN check lapsed; due 5/8/14 and done 1/8/15.

## Foster Family Home Information Confidentiality [17-1454-13.1]

13.1.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

13.1.b.5. No confidentiality/privacy right training for all caregivers.

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

41.(b)(7) Have a current tuberculosis clearance that meets department of health guidelines; and

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

Comment:

41.b.7. NO 2013 TB Clearance on file for CG #1. 8/5/14 TB on present. CTA unable to determine compliance. Date of last visit 2/24/14.

41.b.8. CPR/First Aid lapsed for CG #1. CPR/First done 7/20/14 and due 6/20/14.

41.b.8. No 2013 bloodborne pathogen for CG #1 and CG #3. 2014 bloodborne pathogen in file. Last visit 2/24/14. CTA unable to determine compliance.

## Foster Family Home Records [17-1454-52]

52.(a)(3) A list of applicable community resources.

Comment:

52.a.3. No community resource list in home.

Cymbree Haitsuka  
Compliance Manager

4/9/15  
Date

\_\_\_\_\_  
Primary Care Giver

\_\_\_\_\_  
Date

# Foster Family Home - Corrective Action Report

Provider ID: 4-140066

Home Name: Rosalie Alcon, CNA

161 West Papa Avenue

Kahulul HI 96732

Review ID: 4-140066-1

Reviewer: Cymbree Haltsuka

Begin Date: 4/30/2015

End Date: 5/15/15

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

41.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

Comment:

41.e. No CTA SCG Approval form found in file for CG#2 and CG#3.

## Foster Family Home Physical Environment [17-1454-48]

48.(a)(1) Bathrooms with non-slip surfaces in the tubs and or showers, and toilets adjacent or easily accessible to sleeping rooms;

48.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;

48.(c)(1) The primary or substitute caregiver shall follow appropriate preventative maintenance procedures for equipment and devices used in the care of clients;

48.(c)(2) The primary or substitute caregiver shall follow infection control procedures and proper procedures for disinfecting equipment and devices used in the care of the client; and

48.(e) The home shall have policies regarding smoking on the property that:

Comment:

48.a.1. No non-slip mat found in shower.

48.a.2. No grab bars installed in shower and around toilet area.

48.c.2. No disinfecting equipment found that adheres to the infection control procedures.

48.e. No smoking policy found in file.

## Foster Family Home Client Rights [17-1454-50]

50.(b)(15) Have daily visiting hours and provisions for privacy established;

Comment:

50.b.15 No visiting hours found in file.

## Foster Family Home Records [17-1454-52]

52.(a)(1) Emergency procedures and an evacuation map;

Comment:

52.a.1. No evacuation map found in home.

Cymbree Haltsuka RN  
Compliance Manager

4/30/15  
Date

\_\_\_\_\_  
Primary Care Giver

\_\_\_\_\_  
Date