

Foster Family Home - Corrective Action Report

Provider ID: 1-140067

Home Name: Ellen Grace Ruiz, NA

Review ID: 1-140067-3

94-465 B Pilimai Street,

Reviewer:

Waipahu

HI 96797

Begin Date: 8/22/2016

End Date: 10/31/16

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

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

Comment:

6 (d)(1) Home visit made on 8/22/16 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 9/22/2016.

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;

Comment:

7.1.(a)(1) CG#4 Second sets of fingerprinting not present in the home.

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.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(b)(7) CG#2 and CG#3 TB screening completed August 2016 with no proof of TB clearance evidence by either chest X-ray or TB skin test results.

41.(f)(1) HHM#1 TB screening completed August 2016 with no proof of TB clearance evidence by either chest X-ray or TB skin test results.

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Foster Family Home

Fire Safety

[17-1454-45]

45.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

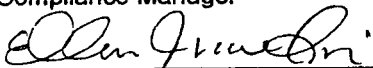
45.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

45.(a) Fire drills for evening and nights documentations not present in the home.

45.(b)(2) CG#2, CG#3, and CG#4 training to implement appropriate emergency procedures in the event of fire not present in the home.

Compliance Manager



Primary Care Giver

Date

8/22/16

Date

Written Plan of Corrections

September 26, 2016

7.1.(a)(1) CG#4 2nd fingerprint done on 9/26/16 and filed permanently in personal binder. This will not happen in the future again and the Home now uses a special calendar for all requirements before expiring or before due date (Fingerprint from Field Print attached).

41.(b)(7) CG#2 and #3 Have obtained proof of TB Clearance on September 04, 2016 and filed in personal home binder permanently. The home will make sure that this will not happen in the future again because the home has a special home calendar for all requirements to track due dates. (TB Clearances attached)

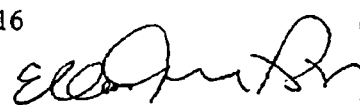
41.(f)(1) HHM#1 obtained a proof of TB clearance on September 04, 2016 and filed permanently in the home personal binder. This will not happen in the future, because the home has special calendar in the home for all requirements for before due dates (TB Clearance attached).

45.(a) CG#2 and CG#3 have conducted a fire drill in the evening on September 02, 2016 and night fire drill will also be conducted on the following months. All CGs will alternate the days, evenings and nights when conducting unannounced fire drills to prevent this from happening again in the future.

45.(b)(2) CG#2, CG#3 and CG#4 will be trained to conduct fire drills. Starting with CGs #2 this month on (September) then CG #3, #4 and all futures CGs will be trained to conduct fire drills so this will not happen again. All CGs are trained to conduct fire drills days, evenings, and nights and all CGs will be trained to implement and conduct appropriate emergency procedures in the event of a fire (Fire drill attached).

9/26/16

Sign:



HOME address: 94465 pilimai St.
waipahu, Hi 96797