

Foster Family Home - Corrective Action Report

Provider ID: 1-100070

Home Name: Amalia Garcia-Lindenmuth,
CNA

Review ID: 1-100070-4

123 Uakanikoo Place

Reviewer:

Wahiawa

HI 96786

Begin Date: 9/20/2016

End Date: 10/17/16

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 9/20/2016 for a 3-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 10/20/2016.

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;

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) CG#1, #2, and #3 eCrim expired on 8/20/16 but renewed on 9/8/2016 with about 2 weeks lapse. CG#6 Fingerprinting not present in the home.

7.1.(a)(2) CG#1, #2, and #3 Adult Protective Services and Child-Abuse-Neglect (APS/CAN) expired on 8/23/16 but renewed on 9/7/16 with about 2 weeks lapse. CG#4 Adult Protective Services and Child-Abuse-Neglect (APS/CAN) expired on 10/17/15 but renewed on 9/7/16 with about 1 year lapse.

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

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

Comment:

41.(b)(7) CG#1 TB clearance completed on 7/9/14 and expired on 8/9/15 but renewed on 5/12/16 with about 9 months lapse. CG#2 TB clearance completed on 7/10/14 and expired on 8/10/15 but renewed on 5/18/16 with about 9 months lapse. CG#3 TB clearance completed on 7/9/14 and expired on 8/9/15 but renewed on 9/7/16 with over 1 year lapse. CG#6 TB screening clearance completed on 4/18/16 but no proof of positive TB skin test or negative chest x-ray results present in the home.

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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) Documentation and maintained records of conducting night time fire drill not present in the home.

45.(b)(2) Documentation of CG#4 trained to implement appropriate emergency procedures in the event of a fire not present in the home.

Compliance Manager

Primary Care Giver

Date

Date

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Written Plan of Correction

October 10, 2016

7.1.(a)(1) CG#1, CG#2 and CG#3 eCRim will not lapse in the future. CG#6 completed fingerprinting on September 29, 2016. (See attached fingerprinting result for CG#6).

7.1.(a)(2) CG#1, CG#2, CG#3 and CG#4 will not lapse in APS/CAN in the future again.

The home will use a spreadsheet to track all requirements before due date.

41.(b)(7) CG#1, CG#2, CG#3 will not lapse again because the home will track TB clearance for due date to prevent this happening in the future. CG#6's completed TB skin test dated August 7, 2014 to prove that the result was positive and Chest x-ray dated on August 7, 2014 result was negative. This will not happen again in the future because the two results are kept in the Home Binder permanently and will continue to do an annual TB Screening Questionnaire. (TB document attached).

45.(a) The foster home will be correcting its fire drills, to include unannounced fire drills at night. This is to follow the Hawaii Administrative Rule #45.(a) which is to conduct unannounced fire drills during the day, evening and night alternatively, so that this will not happen again in the future. (See Fire Drill attached).

45.(b)(2) The foster home will also have all caregivers take turns in performing the fire drills in the future, to follow Hawaii Administrative Rule #45.(b)(2). This is to ensure that this will not happen again and that all caregivers are properly trained to perform, conduct and implement appropriate measures in the event of a real fire. (See Fire Drill attached).

Date: 10/13/16

Signed: 

Print: Analia Garcia-Lindenmuth

Address: 123 Uakanikoo Place

Wahiawa, HI 96786