

# Foster Family Home - Corrective Action Report

Provider ID: 2-512328

Home Name: Arsenio Lopez, CNA

Review ID: 2-512328-3

920 Puku Street

Reviewer:

Hilo HI 96720

Begin Date: 5/18/2016

End Date: 5/18/16

## Foster Family Home

## Required Certificate

[17-1454-6]

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

Comment:

Survey performed to recertify three client home. Home not in compliance on day of survey. Corrective Action Report issued with plan of correction due to CTA by 6/18/16.

## 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:

Ecrim not in home binder for 2015, was present for 2013 and 2016 for CG #1.

\_\_\_\_\_  
Compliance Manager

*[Signature]*  
\_\_\_\_\_  
Primary Care Giver

5/18/16  
\_\_\_\_\_  
Date

5/18/16  
\_\_\_\_\_  
Date

Asenior A. Lopez  
Sumner Co. Popr

5/18/16

Rule #

7.1(a)(i) I didn't have e-crim for 2015, I had 2013 + 2016.  
I will update e-crim every other year + keep in  
my binder for all congresses.

I will check my binder every month to look for  
expired documents. I didn't know that e-crim has to be  
done every other year. Now I know.

Thank you for your understanding.