

Foster Family Home - Corrective Action Report

Provider ID: 1-100098

Home Name: Chieko Riccio, CNA

Review ID: 1-100098-6

134 Hoopla Place

Reviewer:

Wahiawa HI 96786

Begin Date: 12/19/2016

End Date: 12/23/16

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

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

Comment:

Home visit for a 3 person CCFFH recertification review made on 12/19/16. Corrective Action Report issued during home visit with all items due to CTA by 1/19/17.

6.(d)(1) - see applicable sections of the review

Foster Family Home Background Checks [17-1454-7.1]

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)(2) - No current APS/CAN for CG #4 (expired on 8/14/16).

Compliance Manager



Primary Care Giver

Date

12/19/16

Date

7.1.(9)(2)- What did you do to fix the problem? I sent CTA APS/CAN completed on 12/27/16 on 12/28/16. I now understand that APS/CAN is done every 2 years after CG has done it 2 years in a row.

Chieko Riccio

 12/21/2016