

# Foster Family Home - Corrective Action Report

Provider ID: 1-561581

Home Name: Lily Mendoza, CNA

Review ID: 1-561581-4

91-960 Komana Street

Reviewer:

Ewa Beach HI 96706

Begin Date: 11/7/2016

End Date:

12/9/16

## 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 11/7/2016 for a 3-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 12/7/2016.

6 (d)(1) see applicable sections of this review.

## Foster Family Home

### Personnel and Staffing

[17-1454-41]

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

41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41.(b)(8) CG#3 lapsed in First Aid due on/before 5/15/16 done on 9/5/16 and Blood Borne Pathogen (BBP) due on/before 5/26/16 done on 9/5/16.

41.(c) CG#3 Annual Training completed 8 hours in a 3-client home.

## Foster Family Home

### Fire Safety

[17-1454-45]

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

Comment:

45.(b)(2) Documentation indicating CG#5 conducted fire drill not present in the home.

## Foster Family Home

### Insurance Requirements

[17-1454-49]

49.(a)(1) General;

Comment:

49.(a)(1) Liability Insurance for CG#6 not present in the home.

# Foster Family Home - Corrective Action Report

Foster Family Home

Records

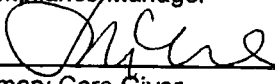
[17-1454-52]

52.(c)(5) Medication schedule checklist;

Comment:

52.(c)(5) Clients #2 and #3 Rx Pharmacy Label, doctor's orders, and Medication Administrative Record (MAR) did not match for one of the medication.

Compliance Manager



Primary Care Giver

Date

11/7/16

Date

# Written Plan of Correction

Dec. 5, 2016

- 41 B 8 CG # 3 will not lapse in First Aid and BBP in the future. To prevent this from happening again in the future, the home now uses checklist for all requirements one month before due date.
- 41 C CG # 3 completed 4 hours of annual training to equal to 12 hours this year. To prevent this from happening again in the future, the home now uses checklist for all requirements one month before due date.
- 45 B 2 CG # 2 she has to conduct fire drill in Nov. 9, 2016. To prevent this from happening again, the home will let all the SCS's to conduct fire drill in the future.
- 49 A 1 CG # 6 Now has liability insurance dated Nov. 15, 2016. To prevent this from happening again, the <sup>home</sup> will coordinate with the liability insurance company to make sure all SCS's are added.
- 52 C 5 CIT # 2 + 3 Medication order now match the pharmacy label, Doctor's order + MAR. To prevent this from happening again, the home will coordinate with the pharmacy, Agency and the Doctors to make sure the medications order match.

*[Signature]*

91-960 Komana St.  
Ewa Beach, HI 96706