

Foster Family Home - Corrective Action Report

Provider ID: 1-511099

Home Name: Imelda Viernes, CNA

Review ID: 1-511099-4

94-583 Apii Place

Reviewer:

Waipahu

HI 96797

Begin Date: 12/5/2016

End Date: 12/30/2016

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 12/5/2016 for a 3-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 1/5/2017.

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.

Comment:

41.(b)(8) CG#3 lapsed on Blood Borne Pathogen (BBP) due on/before 1/11/16 done on 2/24/16.

Foster Family Home

Records

[17-1454-52]

52.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

52.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

52.(c)(2) Client #3 current Service Plan not present in the home.

52.(c)(6) Client current RN or SW summary not present in the home.

Compliance Manager

Imelda Viernes

Primary Care Giver

Date

12/5/2016

Date

Written Plan of Correction

Date: 12/17/2016

41. (b)(8) Caregiver #3 Bloodborne Pathogen will not happen again next time.

To prevent it from happening is to set a reminder electronically with my iPhone and written on a calendar.

52. (c)(2) Client current service plan done by RN on October 2016.

52. (c)(6) Client RN
Summary received on November 2016.

Prevention for client records: The home will better communicate with the CM for records update for all clients.

Date: 12/17/2016

Signature: *Amelia Visman*

Address: 94-583 Apii Place Waipahu, HI 96797