

# Foster Family Home - Corrective Action Report

Provider ID: 1-120030

Home Name: Maria Calape, CNA

Review ID: 1-120030-7

91-714 Poloula Place

Reviewer:

Ewa Beach

HI 96706

Begin Date: 11/25/2016

End Date: 1/27/17

## 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 11/25/2016 for a 3-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 12/25/16.  
6(d)(1) see applicable sections of this review.  
Due date for CAP extended to 1/25/17.

## 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)& 7.1(a)(2)-HHM#4 APS/CAN/fingerprinting lapsed. First set of APS/CAN/fingerprinting was done 2013 and second set of APS/CAN/fingerprinting was done 2016.

## 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.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41(f)(1)HHM#1 and CG#2 are missing a current TB clearance.  
41(b)(8)-No current blood borne pathogen training present on CG#2 in binder.

## Foster Family Home Quality Assurance [17-1454-48.1]

48.1.(a)(5) Fire; and

Comment:

48.1(a)(5) No fire extinguisher present in home.

Compliance Manager

Maria Calape  
Primary Care Giver

Date

11/25/2016

Date

## Corrective Plan of Action

7.1(a)(1) & 7.1(a)(2) HHM#4 located copies of APS/CAN/ Fingerprinting dated 5/21/13 , 12/ 19/ 14 and 10/ 24/2016 and provider filed them in CCFFH binder. The home will now have written reminders of due dates for APS/CAN/Fingerprinting in calendar for all household members.

41.(f)(1) HHM#1 TB clearance was not completed due to relocation on 12/4/ 2016.

41.(f)(1) CG#2 TB clearance was done on 1/13/17 and filed in CCFFH binder. The home will utilize a computer program to track personnel TB requirements that are due to prevent any delays in the future.

41.(b)(8) CG#2 Bloodborne Pathogen training was done 11/01/2016 and placed in PCG's binder. The home will now have reminders through smart phone to track due dates of bloodborne pathogen training for home's caregivers.

48.1(a)(5) Fire extinguishers are now present in the home ( upstairs/downstairs). The home will maintain a designated place for fire extinguishers for easy accessibility.

Maria Calape



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