

Foster Family Home - Corrective Action Report

Provider ID: 1-090126

Home Name: Zenaída Agsalda, CNA

Review ID: 1-090126-4

99-060 Nalopaka Place

Reviewer:

Aiea HI 96701

Begin Date: 1/9/2017

End Date:

1/12/17

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 made on 1/9/2017. Corrective Action Report issued during home visit with all items due to CTA by 2/9/2017.

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

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)-State Name Checks(e-crim)lapsed for CG#1,CG#2 and HHN#2(was due on/before 12/11/16 and done 1/25/16); CG#3 was due 1/21/16 and done 1/25/16.

7.1(a)(2)-APS/CAN lapsed for CG#1, CG#3 (due 12/16/16 and done 12/29/16); CG#2 (due 12/15/16 & was done 12/30/16); HHM #2(due on/before 1/27/16 and done 5/16/16).

Compliance Manager

Primary Care Giver

Date

Date

1-9-17

WRITTEN PLAN OF CORRECTION

January 09, 2017

To whom it may concern:

re: 7.1 (a)(1)-State name checks(e-crim)lapsed for CG#1,CG#2 and HHN#2(was due on/before 12/11/16 and done 1/25/16; CG#3 was due 1/21/16 and done 1/25/16

E-crim will not lapse in the future because due dates are now written in the home's calendar.

re: 7.1(a)(2)-APS/CAN lapsed for CG#1, CG#3 (due 12/16/16 and done 12/29/16); CG#2 (due 12/15/16 and was done 12/30/16); HHM #2(due on/before 1/27/16 and done 5/16/16).

APS/CAN will not lapse in the future because due dates are now written in the home's calendar.

Zenaida Agsalda

99-060 Nalopaka Place

Aiea, Hawaii 96701