

# Foster Family Home - Corrective Action Report

Provider ID: 1-130032

Home Name: Carmelita Sabio, CNA

Review ID: 1-130032-4

94-384 Kahuanani Street

Reviewer: Sue Lo

Waipahu HI 96797

Begin Date: 6/15/2017

End Date: 6/26/2017

## 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 6/15/2017 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 7/15/2017.

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) CG#3 lapsed on eCrim: due on/before 10/15/2016 - was done 10/23/2016.

7.1.(a)(2) Lapsed on Adult Protective Services/Child Abuse Neglect (APS/CAN) checks for the following CGs: due on/before 3/16/2017 - was done on 3/27/2017 for CG#1; due on/before 6/6/2016 - was done on 6/10/2016 for CG#2; and due on/before 10/15/2016 - was done on 10/27/2016 for CG#3.

## Foster Family Home Personnel and Staffing [17-1454-41]

41.(b)(7) Have a current tuberculosis clearance that meets department of health guidelines; and

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

Comment:

41.(b)(7) CG#4 lapsed on TB clearance due on/before 2/26/2016 - was done on 6/2/2017.

41.(b)(8) CG#4 CPR and first aid training expired on 9/10/2016 and no current CPR and first aid training present in the home.

Lapsed on Blood Borne Pathogen (BBP) for the following CGs: Due on/before 2/6/17 - was 3/3/2017 for CG#3 and due on/before 5/15/2017 - was done on 5/16/2017 for CG#4.

[Signature]  
Compliance Manager

6/15/2017  
Date

[Signature]  
Primary Care Giver

6/15/17  
Date

**Written Plan of Corrections**

Fax Date: 6/21/2017

7.1(a) (1) ~~CGH~~ 3 will not lapse in ECRIM anymore.

7.1 (a)(2) ~~CGH~~-1, ~~CGII~~-2, and ~~CGH~~-3 will not lapse in APS/CAN anymore.

41. (b) (7) ~~CGH~~-4 will not lapse in TB clearance in the future again.

41. (b) 7 ~~CGH~~-3 and ~~CGH~~-4 will not lapse in Blood Borne Pathogens in the future.

~~CGH~~-4 completed CPR and First Aid on 06/20/2017  
(Date)

The Care Home will remind ~~CGH~~-4 to renew the CPR and the First Aid one month before the due date by following the reminder chart.

Prevention Plan:

From now on, the care home will not lapse in ECRIM, APS/CAN and BBP.

The Care Home has a chart of records for all CGS to renew all requirements for CTA so this will not happen again in the future.

CARMELITA SABIO

*Cosabio*

(Print and Signature)

**Home Address:**

94-384 Kahuanani St, Waipahu, Hawaii 96797