

# Foster Family Home - Corrective Action Report

Provider ID: 1-513102

Home Name: Eden Bachiller, CNA

Review ID: 1-513102-5

91-846 Keena Place

Reviewer: Sue Lo

Ewa Beach

HI 96706

Begin Date: 6/9/2017

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 6/9/2017 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 7/9/2017.


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

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

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

Comment:

41.(b)(7) TB Skin Test (TST) for TB Clearance last done on 5/6/2015 and current TST renewal for 2016 and 2017 not present in the home for #3.

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

6/9/2017  
Date

06-09-2017  
Date

## Written Plan of Correction

Date: 06-22-2017

41(b)(7) CG #3 completed (TST) TB skin test given on 06-19-2017, completed reading on 06-21-2017.

Prevention Plan: Home now has a list of all requirements to renew before due date and for TST every year for CG #3 and all CGS and all household members as required.

Eden S. Bachiller  
91-846 Keena PL  
Ewa Beach HI 96706