

# Foster Family Home - Corrective Action Report

Provider ID: 4-160065

Home Name: Chealeen Obrero, NA

Review ID: 4-160065-2

22 W. Hawaii St.

Reviewer: Sue Lo

Kahului HI 96732

Begin Date: 7/26/2017

End Date: 8/14/2017

## 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 7/26/2017 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 8/26/2017

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

## Foster Family Home Information Confidentiality [17-1454-13.1]

13.1.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

13.1.(b)(5) Confidentiality/Privacy training not present for CG#1 and CG#3.

Solo  
Compliance Manager

7/26/2017  
Date

Curry  
Primary Care Giver

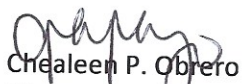
7/26/17  
Date

July 26, 2017

13.1 (b)(5) CG # 1 and CG # 3 completed Confidentiality/Privacy training on July 26, 2017 and on July 26, 2017 for Chapter 13.1 .

Prevention Plan:

From now on, the Home will train all CGs and HHM regarding Confidentiality/Privacy training.



Chealeen P. Obrero  
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