

Foster Family Home - Corrective Action Report

Provider ID: 1-160054

Home Name: Sheila Limon, CNA

Review ID: 1-160054-2

1122A Ahe Ahe Ave

Reviewer: Carrie Wakai

Wahiawa HI 96786

Begin Date: 5/16/2017

End Date: 6/16/2017

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 for a 2 bed recertification survey. A corrective action report was issued during the visit with written plan of correction due to CTA by 6/16/2017.

Foster Family Home

Records

[17-1454-52]

52.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

52.(c)(5) Medication schedule checklist;

Comment:

52(c)(2)-There is a discrepancy between the service plan and face sheet. The service plan has CPR checked and the face sheet states do not resuscitate.

52(c)(5)-A medication on the medication administration record for client #1 was not present and had not been supplied since client #1 was admitted to the home. Medication was discontinued by the MD on 5/15/17.

Compliance Manager

S. Limon

Primary Care Giver

Date

5/16/17

Date

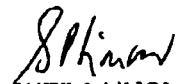
WRITTEN PLAN OF CORRECTION

June 14,2017

52(c)(2)-The home contacted case management for discrepancy between the face sheet and service plan. Case management made revision for the face sheet and service plan, faxed corrected face sheet and service plan to Community Ties of America and attached to binder. The home makes sure to check all clients binder everytime for updates.

52(c)(5)-The home noted ~~on~~ the medication on the medication administration record for client #1 was not present since client #1 was admitted at Home. Make certain that the MD and case management was informed with the unavailability of the medication. Informed MD that medication was not given by daughter since client #1 was admitted at home and a discontinued order was made on 5/15/17. Check all medication lists and record and attached to binder. The home makes sure to check all medication records and update when needed.

Signed:



SHEILA LIMON
1122-A AHEAHE AVENUE
WAHIAWA, HI 96786