# Foster Family Home - Corrective Action Report

Provider ID:

1-090067

Home Name:

Julien Vergara, CNA

Review ID:

1-090067-11

45-138 D William Henry Road

Reviewer:

Sue Lo

Kaneohe

HI 96744

Begin Date:

7/18/2017

End Date:

3/8/2017

#### **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 7/18/2017 for a 3-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 8/18/2017.

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) eCrime done on 2017 and 2015 not present in the home for CG#2 and CG#3.

7.1.(a)(2) Adult Protective Services and Child Abuse Neglect (APS/CAN) checks last done 9/11/2013 for CG#2 and last done on 10/9/2013 for CG#3 therefore, current APS/CAN not present for CG#2 and CG#3.

Compliance Manager

Primary Care Give

)ate

Date

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7/18/2017 22:03 PM

# Written Plan of Correction

August 16, 2017

7.1 (a)(1) – CG# 2 and CG#3 will not miss any more on eCrim. To prevent this from happening again, I will revise my requirement list and renew it before due date.

7.1(a)(2) APS/CAN was done on 7/24/2017 for CG#2 and on 7/28/2017 for CG#3.

To prevent this, I am using the new revised requirement list to renew all requirement before expiration date.

Julian Vergara

45-138D William Henry Road

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Kaneohe, HI 96744