

Foster Family Home - Corrective Action Report

Provider ID: 1-562919

Home Name: Conchita Batoto, CNA

1050 Wong Lane

Honolulu

HI

96817

Review ID: 1-562919-6

Reviewer: Sue Lo

Begin Date: 12/14/2017

End Date: 2/8/2018

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. Corrective action report issued during home visit with corrective action plan due to CTA on 1/14/2018.

Foster Family Home Client Care and Services [17-1454-43]

43.(c)(5)(A) Appropriate, safe techniques, and infection control procedures; and

Comment:


43.(c)(5)(A) Home unsafe practice during fire drill was done more than 5 minutes during evacuation for Client #1 to evacuate out of the house to safe area to prevent danger of smoke inhalation.



Compliance Manager

12/14/2017

Date



Primary Care Giver

12/14/2017

Date

Community Care Foster Family Home (CCFFH)
 Written Plan of Correction for Deficiencies
 Listed in Corrective Action Report
 Chapter 17-1454

CCFFH Name: Conchita Batoto

CCFFH Address: 1050 Wong lane Honolulu Hawaii 96817

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
43(c)(5) (A)	Unannounced fire drill done safely with in 3 minutes for evacuatoin	12/17/2017	When client #1 Walk slow, I used wheelchair for client #1 So more faster to safe area. Client #2 Can walk alone to safe area. This way it takes less than 3 minutes to be in safe area.

Primary Caregiver's Signature: Conchita Batoto

Print Name: CONCHITA BATOTO

Date of Signature: 01-02-2018