

# Foster Family Home - Corrective Action Report

Provider ID: 1-120031

Home Name: Estelita Batoon, CNA

Review ID: 1-120031-5

94-464 Kupuna Loop

Reviewer: Carrie Wakai

Waipahu HI 96797

Begin Date: 2/7/2018

End Date: 2/16/2018

## 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 an increase to 3 client CCFH certification survey. A Corrective Action Report was issued during the visit with all required items due to CTA by 03/07/2018.

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

41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41(c)-Twelve hours of Annual training not present for CG#4 and CG#5.

## Foster Family Home Fire Safety [17-1454-45]

45.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

45(a)-AM or PM not indicated on fire drill documentation. Fire drill was not conducted by CG#3 in 2017.

Carrie Wakai  
Compliance Manager  
Estelita V. Batoon  
Primary Care Giver

2/7/18  
Date  
2/7/18  
Date

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

CCFFH Name: ESTELITA BATON

CCFFH Address: 94-464 KUPUNA LOOP, WAIPAHU-HI. 96797

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
41 (C)	Scheduled 12 hours in-service for CG# 4 and CG# 5 and coordinate training for them. Training was done for CG# 4 on FEBRUARY 12, 2018 and CG# 5 on FEBRUARY 10, 2018. Form has been put into home binder.	2/16/18	Home has developed a calendar in front of the personnel binder with all due dates.
45(a)	Cannot correct what I have done. NOT indicated AM/PM on the Fire drills.	2/16/18	In the future, make sure the fire drills will indicate AM/PM. Fire drills will be done by each caregivers at least once a year and has been scheduled on calendar.

Primary Caregiver's Signature: Estelita V. Baton

Print Name: ESTELITA BATON

Date of Signature: 2/16/18