

Foster Family Home - Corrective Action Report

Provider ID: 1-512279

Home Name: Flordelisa Tomas, CNA

Review ID: 1-512279-6

94-1187 Halelehua Street

Reviewer: Sue Lo

Waipahu HI 96797

Begin Date: 2/26/2018

End Date: 3/19/2018

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 3/26/2018.

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/client privacy rights training not present for HHM#3, HHM#4, and HHM#5.

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

41.(b)(7) Have a current tuberculosis clearance that meets department of health guidelines; and

Comment:


41.(b)(7) TB Screening Clearance was done on 6/2/17 but no proof +/- TB skin test results or Chest X-Ray for CG#2.

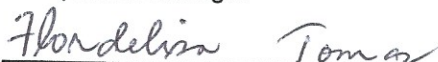
Foster Family Home Insurance Requirements [17-1454-49]

49.(a)(1) General;

Comment:

49.(a)(1) Liability insurance not present in the Home for CG#2.


Compliance Manager


Primary Care Giver

2/26/2018
Date

2/26/18
Date

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

CCFFH Name: Flordelisa Tomas
 CCFFH Address: 94-1187 Halelehua St
Waipahu, HI - 96797

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
13.1(b)(5)	Household members #3, #4, #5. completed confidentiality training.	2/28/2018	Home will train all new HAM and SCG about confidentiality and client privacy right; within 7 days of entering into this Home.
4(b)(7)	Proof of Positive and negative result received for CG#2	8/29/1996	TB result keep in Home Bible at all time.
4(a)(1)	Received liability insurance for CG#2	2/26/2018	Home has a calendar hanging in the kitchen to remind PCG to renew liability insurance every year. PCG will check calendar every month.

Primary Caregiver's Signature: Flordelisa Tomas

Print Name: Flordelisa Tomas Date of Signature: 3/11/2018