

# Foster Family Home - Corrective Action Report

Provider ID: 1-628191

Home Name: Maritess Mercado, NA

Review ID: 1-628191-7

94-1085 Awanani Street

Reviewer: Angelica Galindo

Waipahu HI 96797

Begin Date: 8/15/2018

End Date: 8/16/18

## Foster Family Home

### Required Certificate

[17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home visit for a 2 person CCFFH recertification review made on 8/15/18. Corrective Action Report issued during home visit with all items due to CTA by 9/15/18.

6.(d)(1) - see applicable sections of the review

## Foster Family Home

### Background Checks

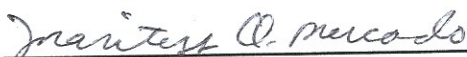
[17-1454-7.1]

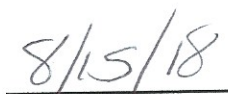
7.1.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

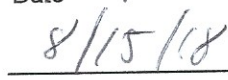
Comment:

7.1.(a)(1) - eCrim lapsed for CG#1, CG#2, and HHM#1: all due on or before 2/01/2018, all done on 3/11/2018.

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date

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

CCFFH Name: MERCADO CCFFH

CCFFH Address: 94-1085 Awanani Pl. Waipahu, HI 96797

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
7-1(a)(1)	Lapse cannot be corrected	8/16/18	In order to prevent lapses on criminal history records and other documents that needs to be renew, I will make sure to add it to my iphone reminder calendar alarm one week prior to the due date and I will also put a note on my refrigerator door, in order for me to remember and renew on time.

Primary Caregiver's Signature: Maritess O. Mercado

Print Name: MARITESS O-MERCADO Date of Signature: 8/16/2018

ATTN: Angelica Galindo