

Foster Family Home - Corrective Action Report

Provider ID: 1-170016

Home Name: Grace Rarangol, CNA

94-109 Poluhi Way

Waipahu

HI 96797

Review ID: 1-170016-1

Reviewer: Carrie Wakai

Begin Date: 5/8/2017

End Date: 5/13/17

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment:

6.d.1-New Home visit made for a 2-bed certification survey. Corrective action report issued with corrective action plan due to CTA on 6/8/2017.

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 No confidentiality/privacy training present for CG#2 and #3.

Compliance Manager

Grace Rarangol

Primary Care Giver

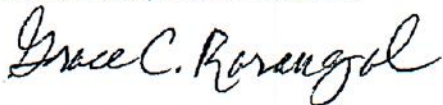
Date

5/8/17

Date

Written Plan of Correction

13.1.b.5 CG#2 and CG#3 signed confidentiality training form on May 9, 2017 and primary caregiver filed in home's personnel record. Primary caregiver will maintain form in personnel record and update as needed.



Grace C. Rarangol
94-109 Poluhi Way
Waipahu, HI 96797

5/12/17