

Foster Family Home - Corrective Action Report

Provider ID: 1-562919

Home Name: Conchita Batoto, CNA

Review ID: 1-562919-8

1050 Wong Lane

Reviewer: David Ayling

Honolulu HI 96817

Begin Date: 12/6/2018

End Date: 12/26/18

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 12/6/18. Corrective Action Report issued during home visit with all items due to CTA by 1/6/19.

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;

7.1.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

7.1.(a)(1)(2) - HHM #1, #2, #3, and #4 need 1st year APS/CAN and fingerprints. PCG is removing barrier to upstairs.

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:

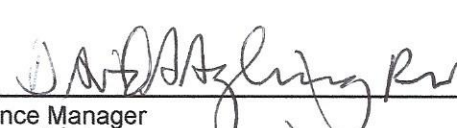
13.1.(b)(5) - HHM's #1, #2, #3, and #4 need training on confidentiality policies and procedures and client privacy rights.

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

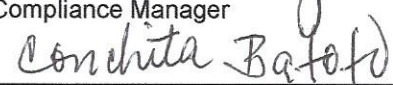
41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(f)(1) - HHM's #1, #2, #3, and #4 need current TB clearances.


Compliance Manager

12/6/18
Date


Primary Care Giver

12/6/18
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: 1056 WONG LANE, HONOLULU, HI 96817

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
7-1(9)(1)(?)	I obtained current APS/can and finger prints for HHM #1, #2 #3, and #4 and placed in my CTA binder	12/16/18	I will have all HHMS get APS/can, fingerprints, TB clearances, and confidentiality
(3)(b)(5)	I gave HHM #1, #2, #3 and #4 training on confidentiality Policies and procedure		training upon moving into my house
41-#(1)	I received current TB clearances from HHMS #1, #2, #3, and #4, and placed in my CTA binder.		

Primary Caregiver's Signature: Conchita Batoto

Print Name: CONCHITA BATOTO

Date of Signature: 12/18/18