

# Foster Family Home - Corrective Action Report

Provider ID: 1-586977

Home Name: Abundia Tagaro, CNA

Review ID: 1-586977-5

92-522 Awawa Street

Reviewer: David Ayling

Kapolei HI 96707

Begin Date: 2/19/2020

**Foster Family Home**      **Required Certificate**      **[11-800-6]**

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

Comment:

6.(d)(1) - Annual Home inspection for a 3 person CCFFH. Corrective Action Report issued during home inspection with all items due to CTA by 3/19/20.

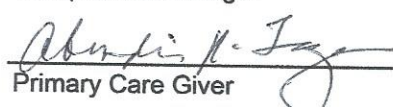
**3 Person Fire Safety, Natural Disaster**      **3 Person Fire Safety**      **(3P) Fire**

(3P)(b)(1) Fire      shall be conducted monthly

Comment:

3P)(b)(1) Fire - No fire drills conducted since 10/2019.

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

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

  
\_\_\_\_\_  
Date

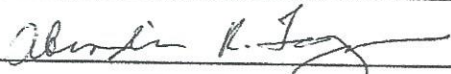
  
\_\_\_\_\_  
Date

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

CCFFH Name: **Abundia Tagaro**

CCFFH Address: **92-522 Awawa Street Kapolei, Hi 96707**

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
3P(b)(1) FIRE	Can't go back in time	2/19/2020	I have scheduled a FIRE DRILL for 2/19/20. I have also scheduled FIRE DRILLS for all Caregivers for 2020 for every month.

Primary Caregiver's Signature: 

Print Name: Abundia Tagaro

Date of Signature: 02/19/2020