

Foster Family Home - Corrective Action Report

Provider ID: 1-140068

Home Name: Beth C. Peralta, CNA

Review ID: 1-140068-8

94-467 Hene Street

Reviewer: Maribel Nakamine

Waipahu

HI 96797

Begin Date: 8/7/2020

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

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

Comment:

Home inspection for a 3 person CCFFH recertification completed.

Corrective Action Report issued during home inspection with all items due to CTA by 9/7/2020.

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

Foster Family Home Background Checks [11-800-8]

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

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

Comment:

8.(a)(1), (2)- CG#1's APS/CAN lapsed on 11/1/2019 and renewed on 11/23/2019; Ecrim lapsed on 10/18/2019 and renewed on 10/30/2019.

Foster Family Home Records [11-800-54]

54.(a) Each home shall maintain an administrative notebook including but not limited to

54.(b)(1) Permit effective professional review by the case management agency, and the department; and

54.(c)(5) Medication schedule checklist;

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(a), (b)(1)- Client #2 and Client #3's charts/binders were not available at the start of home inspection. CMA has possessions of clients' charts.

54.(c)(5)- Medication discrepancies noted for Client #1, Client #2, and Client #3.

Client #1- No Medication Administration Record (MAR) started for the month of August 2020.

Client #2- one medication has an expiration date of 6/2019. No MAR started for the month of August 2020.

Client #3- No MAR started for the month of August 2020.

54.(c)(6)- No ADL/Care Flowsheets started for the month of August on Client #1, Client #2, and Client #3.

Maribel Nakamine, RM

Compliance Manager

B. Peralta

Primary Care Giver

8/7/2020

Date

7 August 2020

Date

CTA RN Compliance Manager: Maribel Nakamine

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate: Beth Peralta

(PLEASE PRINT)

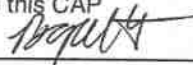
CCFFH Address: 94-467 Hene St Waipahu, HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.(a)(1), 8.(a)(2)	CG#1 will make sure to renew APS/CAN and Ecrim in a timely manner so Certification will not lapse.	08/07/20	CG#1 will put a reminder on Calendar and on Smart Device to alert CG to renew APS/CAN and ECRim in a timely manner to prevent lapse of record.
54.(a) 54.(b) (1)	CG1 called CMA to bring back Client#2 and Client#3's charts back ASAP and it was dropped off within a few minutes so CTA agent may review charts.	08/07/20	Foster Home will Adhere to HAR regarding keeping chart with client at all times and CMA may audit charts during monthly visits with clients.
54.(c)(5)	Client#1, Client#2, and Client#3's MAR was started and completed up to date for the month of August 2020. Client#2 expired medication was discarded properly.	08/07/20	CG's will make sure to chart MAR every time Medications were given to clients. Always check expiration dates and discard expired medication properly.
54.(c)(6)	ADL/Care Flowsheets were started and completed up to date for the month of August 2020 for Client#1, Client#2 and Client#3.	08/07/20	CG's will make sure to chart ADL/ Care Flowsheets everyday for Client#1, Client#2 and Client#3.

All items that were fixed are attached to this CAP

PCG's Signature: Beth C Peralta



Date: 08/07/20

CTA has reviewed all corrected items