

Foster Family Home - Corrective Action Report

Provider ID: 1-563751

Home Name: Adela Salacup, CNA

Review ID: 1-563751-8

94-1067 Kuhaulua Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 5/19/2020

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

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

Comment:

Annual Visit made to a 3 person CCFH completed.

Corrective Action Report issued during home visit with all items due to CTA by 6/19/2020.

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)- CG#4's APS/CAN lapsed on 2/27/2020 and renewed on 3/4/2020. HHM#3 has no current APS/CAN result in home binder. HHM#5 APS/CAN/Fingerprint lapsed on 6/18/19 and renewed on 6/25/19. HHM#6 APS/CAN/Fingerprint lapsed on 6/18/19 and renewed on 6/25/19. HHM#7 no current APS/CAN/Fingerprint or Ecrim results seen in home binder.

Foster Family Home Physical Environment [11-800-49]

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

Comment:

49.(a)(4)- Four emergency exits doors and garage are obstructed with bulky household items preventing a clear pathway for wheelchair to pass through safely.

Foster Family Home Quality Assurance [11-800-50]

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

50.(e)- No intercom/buzzer/doorbell outside of gate; there's a lock noted inside of gate.

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Foster Family Home

Client Rights

[11-800-53]

53.(b)(9)

Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Under the My Choice My way locks on client bedroom and bathroom doors need to have locks from the inside- currently all of the clients' bedrooms doorknobs have no locks from the inside.

Thaisel Nakarui, RN

Compliance Manager

5/19/2020

Date

[Signature]

Primary Care Giver

5/19/20

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: Adela Salacup

(PLEASE PRINT)

CCFFH Address: 94-1067 KUHAULUA Street Waipahu Hawaii 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),(2)	Lapse cannot be corrected for CG#4, HHM#5 and HHM#6. For HHM#3 and HHM#7, both obtained a current APS/CAN/Fingerprinting or E-Crim. Results were filed in home binder.	05/19/20 06/15/20 06/29/20	Home will use calendar and alert on android phone to input all due dates of background checks at least 7 weeks before expiration

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 09/15/20

CTA has reviewed all corrected items

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: Adela Salacup

(PLEASE PRINT)

CCFFH Address: 94-1067 KUHAULUA Street Waipahu Hawaii 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?
49.(a) (4)	Obstruction in garage for pathway for exit. Fire plan have been corrected and will not be using the garage as an exit. All exits have been cleared of all bulky household items.	06/01/ 20	The home will keep exits clear at all times. In keeping in mind the pathway for exit.
50.(e)	A new doorbell/intercom have been installed at the gate. Easily accessible for anyone coming through the home.	06/12/2 0	Home will maintain the doorbell buzzer/intercom at the gate.

All items that were fixed are attached to this CAP

PCG's Signature: Adela Salacup

Date: 09/15/20

CTA has reviewed all corrected items

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: Adela Salacup

(PLEASE PRINT)

CCFFH Address: 94-1067 Kuhaulua Street Waipahu Hawaii 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?
53.(b) (9)	All doors to client's rooms and bathroom have been installed with new door knobs that includes a lock and key. Keys have been distributed to all clients and kept in their room. While the other spare is accessible in a drawer where all household members and caregivers are aware of.	06/10/ 20	Home will adhere to the My Choice My Way rules for clients' privacy rights.

All items that were fixed are attached to this CAP

PCG's Signature: Adela Salacup

Date: 06/17/20

CTA has reviewed all corrected items