

# Foster Family Home - Corrective Action Report

Provider ID: 1-573700

Home Name: Elvira Fernandez, RN

Review ID: 1-573700-7

2385 Haumana Place

Reviewer: Jackie Chamberlain

Honolulu

HI 96819

Begin Date: 9/30/2020

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

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

Comment:

6(d)(1) Home inspection made for a 3 bed CCFFH recertification. corrective action required to CTA within 30 days

## Foster Family Home Information Confidentiality [11-800-16]

16.(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:

16.(b)(5) No proof of training to house hold members living in the upstairs space

## Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(6) Comply with all applicable federal, state, and county laws, ordinances, rules, regulations, and regulatory requirements, including but not limited to statutes that prohibit discrimination against any person, on the grounds of race, color, national origin, religion, creed, sex, age, marital status, or handicap;

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

41.(f)(2) Background checks

Comment:

41.b.6. f (1-2) The home had an upstairs living space. No proof was presented that the home is legally permitted to be two separate homes. Therefore, the home is considered one unit, not separate units. Individuals living on the other side of door were not listed as household members. No TB clearance or background checks present.

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

(3P)(a) Fire The home shall have a written plan of evacuation and safe care of the client away from the home in case of a fire, natural disaster or other emergency. The plan shall be:

Comment:

(3P)(a) Fire Both fire extinguishers are expired "red zone"

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

49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(c)(3) Indoor and outdoor living spaces are cluttered in an unsafe manner including no table space for clients to eat meals



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Foster Family Home

Client Rights

[11-800-53]

53.(b)(15)

Have daily visiting hours and provisions for privacy established;

Comment:

53.(b)(15) visiting hours state limited to 7a-7p. Per "My choice my way" visiting hours cannot be restricted

*J. Chamberlain* *PN*  
Compliance Manager

10/1/2020  
Date

*[Signature]*  
Primary Care Giver

10/1/20  
Date