

Foster Family Home - Corrective Action Report

Provider ID: 1-509284

Home Name: Edgar Dulig, CNA

Review ID: 1-509284-8

94-991 Kualua Place

Reviewer: Julie Hastings

Waipahu

HI 96797

Begin Date: 10/16/2020

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 completed for a 3 person CCFFH recertification.

-Corrective Action Report issued during home inspection with all written corrections due to CTA by 11/16/20.

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#1 and CG#4 ECrim lapsed. CG#1 did on 7/3/18. Was due on or before 7/3/20. Completed 7/6/2020. CG#4 did on 11/17/16. Was due on or before 11/17/18. Completed on 4/17/19.

8.(a)(2)

CG#1, CG#3 and CG#4 APS/CAN lapsed.

CG#1 did on 5/9/18 was due on or before 5/9/20. Completed on 6/8/20.

CG#3 did on 11/10/17 was due on or before 11/10/18. Completed on 12/4/18.

CG#5 APS/CAN lapsed did on 7/6/18 no new APS/CAN on record

CG#4 did on 11/16/16 was due on or before 11/16/18. Completed on 5/1/19.

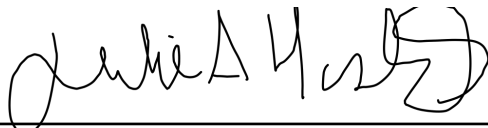
Foster Family Home Medication and Nutrition [11-800-47]

47.(d)(1) By order of a physician;

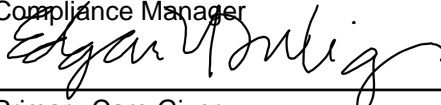
Comment:

47.(d)(1)

Client #1 does not have an order for restraint.



Compliance Manager



Primary Care Giver

10/16/2020

Date

10/16/2020

Date

CTA RN Compliance Manager: Julie Hastings

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

PCG's Name on CCFFH Certificate: Edgar U. Dulig

(PLEASE PRINT)

CCFFH Address: 94-991 Kualua Place, Waipahu HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	How was violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.(a)(1)	Ecnim lapse can not be corrected		10-16-20	CCFFH will use a calendar hang on the wall to write all due dates. Background check will be done earlier than due date to prevent future lapse.
8.(a)(2)	APS/CAN completed but it lapse can not be corrected.		10-16-20	Home will be use hang calendar to track all due dates.
	CG#5 was obtained & receipt it was placed in home records. Will fax to CTA after received the copy.		10-19-20	Background check will be done one month before expiration date to prevent future lapses (Fieldprint office it takes time to issue the records copy)
47.(d)(1)	No Action was taken. Restraint orders from the doctor with date are remains active for patient safety are on file from client's chart during CTA review.		10-16-20	PCG supposed to be sitting down with the surveyor during review. If they cannot find the doctor's order, PCG will easy to pin point the doctors order they looking for. This event will prevent the PCG to be cited in the future CTA review.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10-26-20

CTA has reviewed all corrected items