

# Foster Family Home - Corrective Action Report

Provider ID: 1-150071

Home Name: Elena Laragan, CNA

Review ID: 1-150071-8

91-702 Kilinahe Street

Reviewer: Jackie Chamberlain

Ewa Beach

HI 96706

Begin Date: 11/16/2020

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

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

Comment:

6(d)(1) CCFFH inspection made for a 2 bed annual inspection. Corrective action report issued during CCFFH visit with corrective action plan due to CTA within 30 days of inspection

## 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) wheelchair ramp does not meet building codes. The incline is too steep. CCFFH will need to correct the wheelchair ramp to meet code standards by the next inspection as the CCFFH will need to consult with a contractor and may need to get a special permit from the DPP

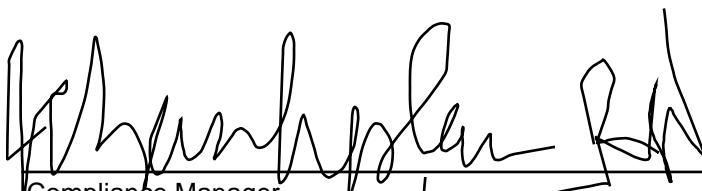
## Foster Family Home Records [11-800-54]

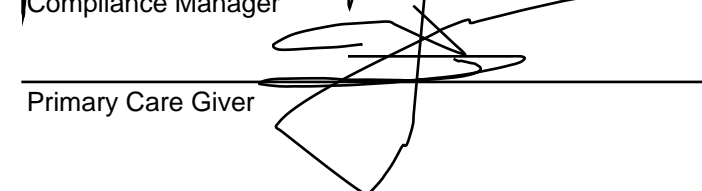
54.(c)(5) Medication schedule checklist;

Comment:

54.c.5 Medication discrepancy for client #1 – 1 medication prescription label did not match medication administration record with "hold" parameters

Client # 2 MAR from CMA was not present in the CCFFH at the time of inspection

  
Compliance Manager

  
Primary Care Giver

11/16/20  
Date

11/16/20  
Date

CTA RN Compliance Manager: Reply to Terri Van Houten RN /Jackie Chamberlain RN

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

PCG's Name on CCFFH Certificate: ELENA LARAGAN  
(PLEASE PRINT)

CCFFH Address: 91-702 KILLNAHE ST. EUWA BEACH, HI. 96706  
(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?
54.c.5 (CLIENT #1)	I CALLED HER DOCTOR TO CORRECT THE PROBLEM BY UPDATING THE PHARMACY ON THIS MEDICATION.	11/19/20	I WILL MAKE SURE THAT THE MEDICATION PRESCRIPTION LABEL WILL MATCH THE MAR AT ALL TIMES.
(CLIENT #2)	I FOLLOW UP WITH MY CMA RIGHT AWAY TO FAX THE MAR FOR MY CLIENT.	11/16/20	I WILL SEE TO IT THAT MAR IS ALWAYS AVAILABLE AT ALL TIMES.

All items that were fixed are attached to this CAP

PCG's Signature: \_\_\_\_\_

Date: 11/24/20

CTA has reviewed all corrected items

CTA RN Compliance Manager: Reply to Terri Van Houten RN / Jackie Chamberlain RN

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

PCG's Name on CCFFH Certificate: EIENA LARAGAN  
(PLEASE PRINT)

CCFFH Address: 91-702 KILINAHE ST. EWA BEACH, HI. 96704  
(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?
49.6a)(4)	WE REFER ON THE BUILDING CODES + FOLLOW IT.	12/16/20	TO ALWAYS REFER ON BUILDING CODES

All items that were fixed are attached to this CAP

PCG's Signature: \_\_\_\_\_

Date: 12/21/20

CTA has reviewed all corrected items