

Foster Family Home - Corrective Action Report

Provider ID: 1-561135

Home Name: Imelda Sausal, CNA

Review ID: 1-561135-10

6282 B Ibis Avenue

Reviewer: Jackie Chamberlain

Ewa Beach

HI 96706

Begin Date: 8/6/2020

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 2 bed CCFFH recertification. Corrective action plan due to CTA within 30 days

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 new federal HCBS rules, client bedroom and bathroom doors are required to be able to be locked only from the inside by the client for privacy for client # 1

Foster Family Home Records [11-800-54]

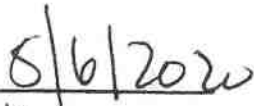
54.(c)(5) Medication schedule checklist;

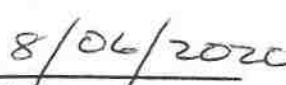
Comment:

54.(c)(5) Client # 1 and # 2 medication administration record has not been signed since for August for any routine or PRN medications


Compliance Manager


Primary Care Giver


Date


Date

CTA RN Compliance Manager: JACKIE CHAMBERLAIN, RN

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

PCG's Name on CCFFH Certificate: IMELDA SAUSAL
(PLEASE PRINT)

CCFFH Address: 6282B IBIS AVENUE, EWA BEACH, HAWAII 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?
53.b.9	CHANGED NEW DOOR KNOB THAT CAN LOCKED ONLY BY CLIENT FROM THE INSIDE FOR CLIENT'S PRIVACY.	08/10/20	PRIMARY CAREGIVER NEEDS TO BE UPDATED TO NEW FEDERAL HCBS RULES.
54.c.5	SIGNED AUGUST 2020 MAP OF TWO CLIENTS WAS ACCIDENTALLY LEFT AT UBER TRANSPORTATION PROVIDER'S VAN. I CALLED UBER DRIVER TO DROP IT OFF IN OUR ADDRESS.	08/06/20	PRIMARY CAREGIVER NEEDS TO CHECKED THE VAN BEFORE LEAVING TO MAKE SURE NOTHING WAS LEFT.

All items that were fixed are attached to this CAP

PCG's Signature: Imelda Sausal

Date: 09/03/20

CTA has reviewed all corrected items