

Foster Family Home - Corrective Action Report

Provider ID: 1-110078

Home Name: Jane Fernandez, CNA

Review ID: 1-110078-13

94-1205 Lumikula Street

Reviewer: Julie Hastings

Waipahu HI 96797

Begin Date: 10/15/2020

Foster Family Home	Required Certificate	[11-800-6]
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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 approved written corrections due to CTA by 12/11/2020

Foster Family Home	Background Checks	[11-800-8]
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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 e-Crim lapsed. last e-Crim done on 10/8/18. Was due on or before 10/8/20. No current e-Crim

8.(a)(2)
CG#1 APS/CAN lapsed. last APS/CAN done 9/12/16. Due 9/12/18 and 9/12/20. No Current APS/CAN.

CG#6 APS/CAN lapsed. last APS/CAN done 4/19/18. Due 4/19/20. No current APS/CAN.

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(a)(2) Be a NA, an LPN, or RN;

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

41.(e) The primary caregiver shall identify all qualified substitute caregivers, approved by the department, who provide services for clients. The primary caregiver shall maintain a file on the substitute caregivers with evidence that the substitute caregivers meet the requirements specified in this section.

Comment:

41.(a)(2)
CG#8 CNA license expired 1/31/20.

41.(b)(7)
CG#1 TB lapsed last TB done 9/4/19. Due to COVID, was due 9/30/20. No current TB

CG#3 TB lapsed last TB done 8/20/19. Due to COVID, was due 9/30/20. No current TB

CG#7 TB lapsed. Last TB done 3/2/18. Was due 3/2/19, and Due to COVID due again on 9/30/20. No current TB.

41.(e) CG#6 and #7 are only approved for a 2 client home.

Foster Family Home - Corrective Action Report

3 Person Staffing

3 Person Staffing Requirements

(3P) Staff

(3P)(b)(4) Staff To maintain your three person certificate all of your caregivers must meet the requirements of an SCG working more than 3 hours in the home even if you only have one client.

Comment:

(3P)(b)(4) Staff
PCG has 2 secondary caregivers that do not meet the requirements of an SCG working in a 3 client home.

3 Person Fire Safety, Natural Disaster

3 Person Fire Safety

(3P) Fire

(3P)(b)(1) Fire shall be conducted monthly

Comment:

(3P)(b)(1) Fire
Last Fire drill documented. 2/1/20, PCG was attempting to fill in the entire years worth of documentation when this RN requested she hand over the documents.

Foster Family Home

Client Rights

[11-800-53]

53.(b)(16) Shall not have dietary restrictions used as punishment; and

Comment:

53.(b)(16) Clients do not have adequate access to kitchen. Stove is blocked by boxes and cabinets. No client access to refrigerator.

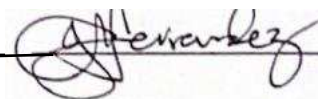


Compliance Manager

10/15/2020

Date

Primary Care Giver



10/15/2020

Date

CTA RN Compliance Manager: Terri Van Houten

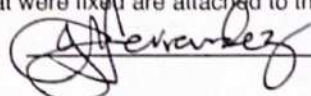
Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate: Jane Fernandez
(PLEASE PRINT)

CCFFH Address: 94-1205 Lumikula Street, Waipahu, HI 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?
6.d.1	I instructed all my substitute caregivers to complete and sign all necessary in and out forms for 3 bedroom clients.	10/10/20	PCG will create spreadsheet of list of required forms and their due dates and remind SCGs of need to renew forms as needed in advance.
8.a.1	Ecrim record was obtained by CG #1	10/20/20	PCG will create spreadsheet of list of required forms and their due dates and remind CG #1 of need to renew ecrim in advance.
8.a.2	APS/CAN was obtained by CG #1. CG#6 noncompliant with requirements, thus was removed as a substitute caregiver and SCG removal form was submitted to CTA on 11/9/2020	11/6/2020 and 11/9/2020	PCG will create spreadsheet of list of required forms and their due dates and remind CG #1 of need to renew APS/CAN in advance. PCG will not hire substitute caregivers who are noncompliant with requirements.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 01/05/2021

CTA has reviewed all corrected items

CTA RN Compliance Manager: Terri Van Houten

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

PCG's Name on CCFFH Certificate: Jane Fernandez

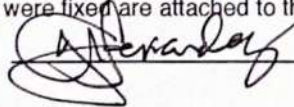
(PLEASE PRINT)

CCFFH Address: 94-1205 Lumikula Street, Waipahu, HI 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?
41.a.2	CG#6 noncompliant with requirements, thus was removed as a substitute caregiver and SCG removal form was submitted to CTA on 11/9/2020.	11/9/2020	PCG will not hire substitute caregivers who are noncompliant with requirements.
41.b.7	TB test and screening we're done by CG#1 and CG#3. CG#7 noncompliant with requirements, thus was removed as a substitute caregiver and SCG removal form was submitted to CTA on 11/9/2020.	10/20/2020 & 11/9/2020	PCG will create spreadsheet of list of required forms and their due dates and remind SCGs of need to renew forms as needed in advance.
41.e	CG#6 and CG #7 are noncompliant with requirements, thus was removed as a substitute caregiver and SCG removal forms was submitted to CTA on 11/9/2020.	11/9/2020	PCG will not hire substitute caregivers who are noncompliant with requirements.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 01/05/2021

CTA has reviewed all corrected items

CTA RN Compliance Manager: Terri Van Houten

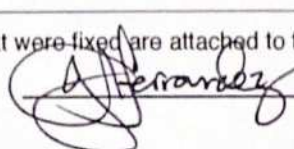
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PCG's Name on CCFFH Certificate: Jane Fernandez
(PLEASE PRINT)

CCFFH Address: 94-1205 Lumikula Street, Waipahu, HI 96797
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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?
3p.b.4	2 SCGs who are noncompliant with requirements for 3 bed home were removed SCG removal forms was submitted to CTA on 11/9/2020.	11/9/2020	PCG will not hire substitute caregivers who are noncompliant with requirements.
3P.b.1	Fire drills missing in past months due to fear of COVID-19 exposure outdoors. However, fire drills were completed for current months. Lapse cannot be corrected.	11/1/2020 to current 1/2/2021	Fire drills will strictly be enforced at the start of the month.
53.b.16	Clients now have access to kitchen with doorbell, refrigerator, microwave. Boxes cleared by stove.	11/11/2020	Ensure pathways are cleared and accessible at all times.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 1/05/2021

CTA has reviewed all corrected items