

Foster Family Home - Corrective Action Report

Provider ID: 1-180063

Home Name: Karen Tulay, CNA

Review ID: 1-180063-4

98-111 Kaulike Drive

Reviewer: Julie Hastings

Pearl City HI 96782

Begin Date: 6/17/2020

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 2 person CCFFH recertification.
-Corrective Action Report issued during home inspection with all written corrections due to CTA by 7/2/2020.

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

41.(a)(4) Have a substitute caregiver who will assume caregiving responsibilities in the absence of the primary caregiver.

41.(h) The primary caregiver shall ensure that all substitute caregivers are approved by the department prior to providing services and shall provide a verbal and written report of all substitute caregiver changes, including additions, terminations and replacements, to the department.

41.(j) When the primary caregiver will be absent or unable to perform regular duties, and clients are present, the primary caregiver shall:

41.(j)(1) Report the situation to the clients' case management agencies verbally and in writing prior to the planned absence or being unable to perform caregiving duties. Unplanned absences or events that prevent the primary caregiver from performing regular duties must be reported within twenty-four-hours of occurring;

41.(j)(2) Assure that a substitute caregiver is available and capable of managing all client care and any event occurring in the home; and

Comment:

41.(a)(4)
No approved caregiver in the home upon this RN arrival. PCG arrived more than 1 hour after this RN arrival.

41. (h)- PCG did not ensure that all caregivers are approved by the department prior to providing services and left all clients in the care of household members

41.(j)

41.(j)(1)

41.(j)(2)


- PCG did not ensure that a substitute caregiver was available prior to leaving the clients alone with household member

Foster Family Home Quality Assurance [11-800-50]

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

50.(e)
No doorbell for access. Gate locked.


Compliance Manager


Date


Primary Care Giver


Date

CTA RN Compliance Manager: JULIE HASTINGS, RN

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

PCG's Name on CCFFH Certificate: KAREN TULAY

(PLEASE PRINT)

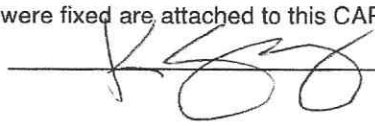
CCFFH Address: 98-111 KAULIKE DR. PEARL CITY HAWAII 96782

(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)(4)	Making sure that if I leave my CCFFH there will be an approved caregiver/s to watch my client/s while I am away or if I will leave my CCFFH	06/18/2020	I will make sure that the one who's watching my client's is approved by the CTA and I will keep in my mind that I household/s member is not allowed to watch my client/s. I will submit an application for one of my household member to be a substitute just in case there's an emergency and my substitute caregiver/s are not available not available.
41.(h)	From now on, I will ensure that whoever watch my clients while I am away is approved by the department.	06/18/2020	I will make sure that all the caregiver/s who are watching my clients while I am away are all approved by the department (CTA). I will submit an application for less than four hours substitute and I will not let someone watch my client/s if they're not approved by the department.
41.(j) 41.(j)(1) 41.(j)(2)	I will make sure that an approved caregiver is available if I leave my CCFFH	06/18/2020	Every time I will leave my CCFFH I will ensure that an approved caregiver/s will be available to watch my client/s while I am away. I will make sure that this will never going to happen again.
50.(e)	Went buy doorbell and put it in the front gate.	06/18/2020	I will make sure that there's an available equipment to notify me if my gate is close.

All items that were fixed are attached to this CAP .

PCG's Signature: _____



Date: 06/19/2020

CTA has reviewed all corrected items