

Foster Family Home - Corrective Action Report

Provider ID: 1-180045

Home Name: Cherry Fiesta, CNA

Review ID: 1-180045-5

94-412 Opeha Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 5/14/2021

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

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

Comment:

Unannounced recertification inspection for a 2 person CCFFH completed.

Corrective Action Report issued during CCFFH inspection with a written plan of correction due to CTA on 6/14/2021.

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

41.(g) The primary and substitute caregivers shall be assessed by the department for competency in basic caregiver skills and specific skill areas needed to perform tasks necessary to carrying out each client's service plan. The documentation of training and skill competency of all caregivers shall be kept in the client's, case manager's, and caregiver's current records with the current service plan.

Comment:

41.(g)- No Basic Skills Checklist present on CG#4 for Client #1.

Foster Family Home Fire Safety [11-800-46]

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(b)(2)- No monthly fire drill conducted by CG#4 for the past 12 months.

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

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a)- CG#2, CG#3, and CG#4 without evidence of having had training for the CCFFH's Emergency Preparedness Plan.

Maribel Nakamine, RN 5/14/2021
Compliance Manager Date
Cherry Fiesta 5/14/2021
Primary Care Giver Date

CTA RN Compliance Manager: Maribel Nakamine

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

PCG's Name on CCFFH Certificate: Cherry Fiesta

CCFFH Address: 94-777 Kaaka Street Waipahu, HI. 96797

(PLEASE PRINT)

(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. (g)	Basic Skill Checklist completed for caregiver #4 for Client #1	5/17/21	Home will have basic skills checklist done for all caregivers within 5 days of client admission.
46. (b) (2)	Caregiver #4 completed monthly fire drill for this month.	5/16/21	Home will use a calendar to designate a caregiver for every month ahead of time to do the fire drill.
50. (a)	CG#2, CG#3, CG#4 finished training for the Home's Emergency Preparedness Plan.	5/16/21	Home will use a checklist to record that SCG are being trained for the Homes Emergency Preparedness Plan.

All items that were fixed are attached to this CAP

PCG's Signature: Cherry Fiesta

Date: 5/27/21

CTA has reviewed all corrected items