

Foster Family Home - Corrective Action Report

Provider ID: 1-120007

Home Name: Denise Yoshida, CNA

Review ID: 1-120007-11

91-471 Fort Weaver Road

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 1/13/2021

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 re-certification. Corrective action report issued during CCFFH inspection with corrective action plan due to CTA within 30 days of inspection.

Foster Family Home Client Care and Services [11-800-43]

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3) No RN delegation present for Client # 2, caregiver # 1 and 2 f [REDACTED]

Foster Family Home Records [11-800-54]

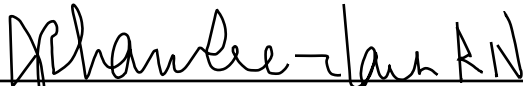
54.(c)(5) Medication schedule checklist;

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

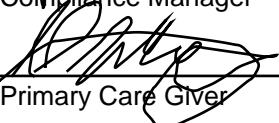
Comment:

54.(c)(5) Medication discrepancy for client # 2 medication prescription label did not match medication administration record and / or the signed MD orders. CMA RN to determine if a medication error has occurred

54.(c)(6) Daily documentation of [REDACTED] s been just [REDACTED] though [REDACTED] including ordered [REDACTED]



Compliance Manager



Primary Care Giver

1/13/21

Date

1/13/21

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: DENISE M TARLETON YOSHIDA
(PLEASE PRINT)CCFFH Address: 91-471 FORT WEAVER ROAD
(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?
43.(c) (3)	caregiver #1 and 2 were given deligation/training for providing care to client #2 for [REDACTED] administration in accordance with client #2's service plan.	1/14/21	Caregiver #1 and #2 will scrutinize future service plans for additional deligation/training that may be needed from rn cm due to changes/additions to care plan. If such entries are noted, a request to cm rn to provide training/deligation of needed skills to fulfill said sevice agreement/plan to provide required care to clients. Deligations will be updated to rn deligation sheet in clients binder, signed and dated, by all rn and deligated Home cg's.
54.(c) (5)	cm:rn reviewed discrepancy in client #2 prescription label and mar and signed md orders and determined cm agency neglected to update mar for said prescription and informed them of error for which they promptly reconciled and provided home with updated/corrected mar which was reviewed by rn and clarified with cg 1 and 2.	1/14/21	upon receiving monthly mar cg#1 will notify cm if there are questionable mar entries that are not matching dr's signed orders and/or medication labels. clarification will be made promptly to avoid any medication errors or confussion in administration.

 All items that were fixed are attached to this CAPPCG's Signature: [Signature]Date: 2/8/21 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 of CCFFH Certificate: DENISE M TARLETON YOSHIDA
(PLEASE PRINT)

CCFFH Address: 91-471 FORT WEAVER ROAD
(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) (6)	[REDACTED] created for client #2 To record all [REDACTED] readings and [REDACTED] administrations	1/15/21	Home will use client #2's [REDACTED] log to accurately record [REDACTED] and [REDACTED] to effectively monitor clients [REDACTED]

All items that were fixed are attached to this CAP

PCG's Signature: [Signature]

Date: 2/9/21

CTA has reviewed all corrected items