

Foster Family Home - Corrective Action Report

Provider ID: 2-511271

Home Name: Candida Foronda, CNA

Review ID: 2-511271-14

62 Pono Street

Reviewer: Terri Van Houten

Hilo HI 96720

Begin Date: 5/26/2021

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

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

Comment:

6.(d)(1) - Unannounced home inspection for 3 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 6/26/2021.

Foster Family Home Background Checks [11-800-8]

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,CG# 2 and HHM#1 did not have copies of fingerprints in their files.

8.(a)(2) - CG#1 and HHM#1 did not have a current APS/CAN in file (GC#1 expired [REDACTED] and HHM#1 exp. [REDACTED])

Foster Family Home Reporting Changes [11-800-12]

12.(4) In the household composition or structure of the home; and

Comment:

12.(4) - The CCFFH did not notify or update their disclosure form for a change in HHMs.

Foster Family Home - Corrective Action Report

Foster Family Home

Personnel and Staffing

[11-800-41]

- 41.(a)(2) Be a NA, an LPN, or RN;
- 41.(a)(3) Have at least one year of experience in a home setting as a NA, a LPN, or a RN; and
- 41.(b)(4) Cooperate with the department to complete a psychosocial assessment of the caregiving family system in accordance with section 11-800-7.(b)(2).
- 41.(b)(5) Provide non-medical transportation through possession of a valid Hawaii driver's license and access to an insured vehicle, or an alternative approved by the department.
- 41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and
- 41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.
- 41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.
- 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#2 and CG#3 had expired CNA certificates in the admin. binder. (CG#2 exp. [REDACTED] and CG#3 exp. [REDACTED])

41.(a)(3) - CG#1, 2 and 3 did not have evidence of job experience in their file.

41.(b)(4) - CCFFH did not have a PCG disclosure form completed in their binder.

41.(b)(5) - CG#1 and 2 did not have a current state driver's license in their file.

41.(b)(7) - CG#1, 2 and 3 and HHM#1 did not have a current TB clearance on file.

41.(b)(8) - CG#1, 2, and 3 did not have a current first aid certificate on file.

CG#1 and 2 did not have a current CPR card on file.

CG#1 and 2 did not have a current BBP/Infection control training from the last year in their file.

41.(c) - CG#1 did not have evidence of 12 hours of annual training in their file.

41.(e) - CG#2 did not have a copy of their CTA approved SCG form in their file.

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 - CCFFH's last documented fire drill was completed 2/25/20. CG#1 states there was a client in the home through 4/2021.

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

50.(e)(1) Reviews of administrative, fiscal, personnel, and client records;

Comment:

50.(e)(1) - CCFFH did not have administrative records located within the CCFFH at the time of my arrival. Administrative records were located at the [REDACTED] daughter's home.

Foster Family Home Insurance Requirements [11-800-51]

51.(a)(2) Automobile; and

Comment:

51.(a)(2) - CCFFH does not have evidence of current auto insurance.

Foster Family Home Fiscal Requirements [11-800-52]

52.(b) The home shall maintain fiscal records, documents and other evidence that sufficiently and properly reflect all funds received, and all direct and indirect expenditures of any nature related to the home's operation.

Comment:

52.(b) - Monthly budget was last documented in June 2019.

Foster Family Home Client Rights [11-800-53]

53.(b)(15) Have daily visiting hours and provisions for privacy established;

Comment:

53.(b)(15) - CCFFH policy for visitation indicates hours are from 10 am - 6 pm. Per federal regulation, My Choice, My Way, visitation hours must be open.

Foster Family Home Records [11-800-54]

54.(a)(3) A list of applicable community resources.

Comment:

54.(a)(3) - CCCFFH did not have a copy of a community resource list.



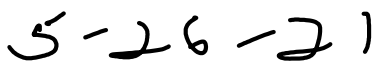
Compliance Manager



Primary Care Giver



Date



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: Candida Foronda
(PLEASE PRINT)

CCFFH Address: 62 Pono St. Hilo , Hawaii 96720
(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)	Corrective Action Plan created	May 27,2021	I will comply with the requirements and rules and regulations of [REDACTED] and Hawaii Administartive rules.
8.(a)(1)	CG #1, CG #2, and HH1, fingerprints are completed and resulted . Placed in the home binder .	June 10,2021	Check home binder frequently , and in a timely matter to complete all background checks for all CG and household members . Use wall calendar as a reminder 1 month before due.
8.(a)(2)	CG # 1,CG #2 and HHM #1, APS/CAN are completed and resulted. Placed in the home binder	June 10,2021	Check home binder frequently , and in a timely matter to complete all background checks for all CG and household members . Use wall calendar as a reminder 1 month before due.

All items that were fixed are attached to this CAP

PCG's Signature: Candida Foronda

Date: June 27, 2021

CTA has reviewed all corrected items

CTA RN Compliance Manager: Terri Van Houn

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

PCG's Name on CCFFH Certificate: Candida Foronda
(PLEASE PRINT)

CCFFH Address: 62 Pono St. Hilo , Hawaii 96720
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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?
12.(4)	Disclosure form updated.	June 21, 2021	Reminder to update change to CCFFH if new HHM move in..
41.(a)(2)	CG #2 new CNA certification is in binder and exp date is [REDACTED] CG #3 new CNA certification is in binder and exp date is [REDACTED]	June 18, 2021	Check admin binder frequently , and in a timely manner , to have all certificates current and in admin binder. Use wall calendar as reminder one month before expired.
41.(a)3	CG #1 , CG #2 and CG #3 Job experience form and letter stating years working in [REDACTED] Currently in Admin binder.	June 24, 2021	keep records of employment in binder. Check binder every six months to make sure all documents are filed.
41.(b)(4)	CG #1 filled out PCG disclosure form.	June 21, 2021	Check binder every six months to make sure all documents are filed.
41.(b)(5)	CG #1 has a temporary driver's license issued , and required to make a online appt, and availability is in July 2021, with the covid restrictions lifted , we are able to walk in , Appt on [REDACTED]	June 28, 2021	Check binder every six months to make sure all documents are filed.

All items that were fixed are attached to this CAP

PCG's Signature:  Date: June 27, 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

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(PLEASE PRINT)

CCFFH Address: 62 Pono St. Hilo , Hawaii 96720
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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?
41.(b)(7)	CG #1, CG #2 and CG # 3 and HHM #1 , TB is completed and in Admin binder.	June 27, 2021	Check Admin binder frequently , and set reminders on ical,
41.(b)(8)	CG #1,CG #2 and CG #3 , CPR and first aid are all current and in Admin binder. CG #1 and CG #2 has current BBP/ infection control current , continue education certificate is in Admin binder.	June 25, 2021	To check admin binder frequently, and remind a CG's to send copies to █CG to update the admin binder. Use wall calendar as reminder when documents will expire.
41.(c)	CG #1 has all 12 hrs is annual training completed and is in the Admin binder	June 25, 2021	To check admin binder frequently, and remind a CG's to send copies to █CG to update the admin binder. Use wall calendar as reminder when documents are due.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: June 27, 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: Candida Foronda
(PLEASE PRINT)

CCFFH Address: 62 Pono St. Hilo , Hawaii 96720
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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?
41.(e)	CG #2 copy of CTA approved █ CG form in Admin binder, It was removed to fax required document for █ █ Its is in the Admin binder.	June 6, 2021	To return form as soon as task is completed.
(3P)(b) (1)	Fire drill are completed and documented , it in the Admin binder.	June 6,2021	I will set reminders dates for the fire drill to be conducted monthy and documented.
50.(e) (1)	To always keep Admin binder at it's location of the Care Home. It shall not be removed .	May 26,2021	Keep binder at care home at all times .
51.(a) (2)	Auto insurance in currently in Admin binder. It was removed to fax over to █ █	May 26,2021	To return form as soon as task is completed.

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PCG's Signature: 

Date: June 27, 2021

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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?
52.(b)	Monthly budget is current and in Admin binder.	June 24,2021	To set a monthly reminder to ical . And to frequently check Admin binder.
53.(b) (15)	Placed a vististing hours sign on care home front door.	June 26,2021	Always keep visitng hours visable to see .
54.(a) (3)	Community resources list is now currently is Admin binder	May 28,2021	To check Admin binder every six months to make sure all documents are filed.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: June 27, 2021

CTA has reviewed all corrected items