

Foster Family Home - Corrective Action Report

Provider ID: 1-587777

Home Name: Elsie Estalilla, CNA

Review ID: 1-587777-12

45-582 Paleka Road

Reviewer: Julie Hastings

Kaneohe

HI 96744

Begin Date: 7/7/2021

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

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

Comment:

6.(d)(1)- Home inspection completed for a 3 person CCFH recertification.

Home inspection completed for a 3 person CCFH recertification

Corrective Action Report issued during home inspection with all approved written corrections due to CTA by 8/7/2021

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

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(2)
CG#4 APS/CAN lapsed Did 12/3/18 and Again 4/8/2021

Foster Family Home Information Confidentiality [11-800-16]

16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5)
No Privacy Training for
CG#2, #3, #4, HHM#2

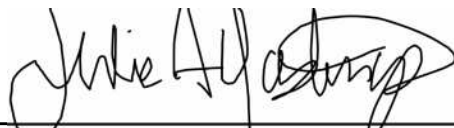
Foster Family Home Personnel and Staffing [11-800-41]

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)CG#1 CG#3(3)
No job experience forms for CG#1 or CG#3

41.(e)
No 3-Client Approval for CG#2, CG#3. CG#4



Compliance Manager



Primary Care Giver

7/7/2021

Date

7/7/2021

Date

CTA RN Compliance Manager: Julie Hastings

**Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-000**

PCG's Name on CCFFH Certificate: Elsie Estafilla

(PLEASE PRINT)

CCFFH Address: 45-582 Paleka Rd., Kaneohe HI 96744

(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?
8.(a)(2)	Lapsed and cannot be corrected	4/18/21	Home will do monthly checks in binder and mark with sticky notes, make reminders on bulletin board for documents close to expiration date. Notify CG's in advance for the renewal.
16.(b)(5)	Binder has documentation for No Privacy Training CG #2 CG #3 CG #4 HMM #2	7/18/21	Home will have documents out where it is visible for inspections.

All items that were fixed are attached to this CAP

PCG's Signature: [Signature]

Date: 7/23/21

CTA has reviewed all corrected items

CTA RN Compliance Manager: Julie Hastings

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

PCG's Name on CCFFH Certificate: Eisie Estalilla

(PLEASE PRINT)

CCFFH Address: 45-582 Paleka Rd., Kaneohe HI 96744

(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)	■ CG has filled out Job experience form CG # 1 ■ CG has documentation for SG # 3	7/18/21	Home is to look through all documents thoroughly and check that each form filled out completely.
41.(c)	■ CG filled out forms for 3 client bed. CG # 2 CG # 3 CG # 4	7/22/21	Home is to contact and communicate with Agency or other Foster Homes who have a 3 client bed if there are any questions regarding forms that are required to be filled for submission.

All items that were fixed are attached to this CAP

PCG's Signature: *Eisie Estalilla*

Date: 7/23/21

CTA has reviewed all corrected items