

Foster Family Home - Deficiency Report

Provider ID: 1-509292

Home Name: Perly Calaycay-Quiaoit, CNA

Review ID: 1-509292-9

4488 Luapele Place

Reviewer: Julie Hastings

Honolulu

HI 96818

Begin Date: 10/20/2021

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

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

Comment:

6.(d)(1)-Annual inspection conducted for this 3 bed home.

A corrective action report (CAR) was issued during the visit and a corrective action plan (CAP) is due back to CTA before 11/23/2021.

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;

Comment:

8.(a)(1)
HHM#2 eCrim lapsed. Was done 7/21/2019. was due again on or before 7/21/21. Completed 7/25/21.

CG#5 eCrim lapsed. Was done 7/21/2019. was due again on or before 7/21/21. Completed 7/25/21.

Foster Family Home Records [11-800-54]

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

54.(c)(2)
Client #3 does not have a service plan in binder.



Compliance Manager

10/20/2021

Date



Primary Care Giver

10/20/2021

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: Perly Calaycay-Quiaoit, CNA
(PLEASE PRINT)

CCFFH Address: 4488 Luapele Place Honolulu, HI 96818
(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.1	HRM#2 eCrim lapsed. Was done 7/21/2019. Was due again on or before 7/21/2021. Completed 4 days after.	7/25/21	PCG will use a wall calendar and mark it ahead of time as a reminder for upcoming due dates to prevent future lapses.
8.a.1	CG#5 eCrim lapsed. Was done 7/21/2019. Was due again on or before 7/21/2021. Completed 4 days after.	7/25/21	I will use a wall calendar and mark any due dates to prevent future lapses.
54.c.2	Notified [REDACTED] Case Management immediately of the missing document.	10/21/21	I will make sure that all necessary documents such as service plan is given to me upon admission.

All items that were fixed are attached to this CAP

PCG's Signature: 

Date: 10/25/21

CTA has reviewed all corrected items