

Foster Family Home - Deficiency Report

Provider ID: 1-560161

Home Name: Carolina Eala, CNA

Review ID: 1-560161-13

94-1403 Hiapo Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 9/21/2022

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 inspection made for a 2-bed recertification. Corrective action report issued during inspection with Plan of Correction due to CTA on 10/21/2022. (30 days from the date the CCFFH is given their deficiency report).

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

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.b.7 and 41.f.1 CG#3 and HHM #2 have expired TB test on 8/25/2021. No new present.

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 CG# 3 have not conducted a fire drill in the past 12 months.

Compliance Manager

Primary Care Giver

Date

Date

CTA RN Compliance Manager: MS. TERRI VAN HOUTEN, RN

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800

PCG's Name on CCFFH Certificate: CAROLINA EALA, CNA
(PLEASE PRINT)

CCFFH Address: 94-1403 HIAPO STREET, WAIPAHU, HI 96797
(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.(b)(7)	Lapsed cannot be corrected CG#3 evidence of TB clearance screening has been obtained and it was placed in the home record.	9/26/22	From now on, I will make sure that we the caregivers and housemember have all TB test done one week before the expiration date .i will use a wall calendar to put all due dates on to prevent from expiring them.
46.(b)(2)	Lapsed cannot be corrected. CG#3 Fire drill has been conducted dated 9/23/2022 and it was place in the home record.	9/23/2022	Starting today, I will make sure that we the caregivers must conduct the firedrill in montly basis (rotation) I will use a wall calendar to put all due dates on to prevent them from expiring

All items that were corrected are attached to this POC

PCG's Signature: Carolina Eala

Date: 10/05/2022

CTA has reviewed all corrected items

Eala