

# Foster Family Home - Deficiency Report

Provider ID: 1-560161

Home Name: Carolina Eala, CNA

Review ID: 1-560161-19

94-1403 Hiapo Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 9/26/2025

## 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 visit made for a 2 bed re-certification inspection.

Deficiency Report issued during CCFFH inspection via email on 9/26/2025 with Plan of Correction due to CTA within 30 days of inspection date of issuance.

## 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

8.(c) The department shall make a name inquiry into the criminal history records for the first two years a case management agency is licensed or a home is certified and annually or biennially thereafter depending on the licensure status of the case management agency or certification status of the home.

Comment:

8(a)(2) APS/CAN checks were lapsed for CG #1, #2, and #3.  
APS/CAN was due on or before 11/5/2024 and was completed on 11/20/2024.


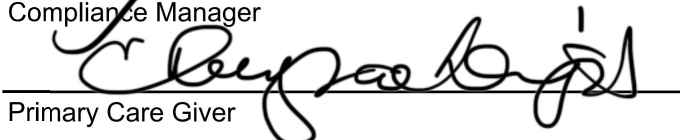
8(c) State Name Check (eCrim) was lapsed for CG #1, #2, and #3.  
CG#1 and CG#3 State Name Check (eCrim) was due on or before 10/4/2024 and was completed on 11/15/2024.  
CG #2 State Name Check (eCrim) was due on or before 10/3/2024 and was completed on 11/14/2024.

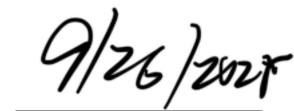
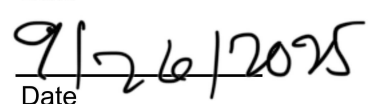
## Foster Family Home Personnel and Staffing [11-800-41]

41.(a)(2) Be a NA, an LPN, or RN;

Comment:

41(a)(2) CNA Prometric registry check are not present for CG#1.

  
\_\_\_\_\_  
Compliance Manager  
  
\_\_\_\_\_  
Primary Care Giver

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date

CTA RN Compliance Manager: PO LIM

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

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

CCFFH Address: 94-1403 HIAPO ST WAIPAHU HAWAII 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?
8(a)(2)	CG#1, #2, #3 APS/CAN lapsed cannot be corrected	9/27/2025	CCFFH will use calendar reminder or cellphone and mark it for 1 month before due date to prevent future lapse
8(c)	CG#1, #2, #3 ECRIM lapsed cannot be corrected	9/27/2025	CCFFH will make a reminder checklist or spreadsheet for all CG's documentations with 1 month notice prior to expiration. And post it in refrigerator door where can see or read it all the time.
41(a)(2)	CG#1 prometric registry check obtained	9/27/2025	CCFFH will ensure CG's are all legally registered and certified by prometric. CCFFH will use calendar reminder on cellphone and mark it for 1 month before due date to prevent future lapse

All items that were corrected are attached to this POC

PCG's Signature: 

Date: 09/27/2025

CTA has reviewed all corrected items