

Foster Family Home - Deficiency Report

Provider ID: 1-610502

Home Name: Erlinda Kimura, RN

Review ID: 1-610502-17

17 Lihi Way

Reviewer: Ryan Nakamura

Wahiawa

HI 96786

Begin Date: 10/15/2025

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 CCFFH inspection for 3 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 10/15/2025).

Foster Family Home Physical Environment [11-800-49]

49.(b)(3) Be in close proximity to the primary or substitute caregiver for timely intervention for nighttime needs or emergencies, or be equipped with a call bell, intercom, or monitoring device approved by the case management agency.

Comment:

49.(b)(3): No evidence present in CCFFH records of written consent of use of camera signed by client's POA in client bedrooms and common living area for client #1, #2, and #3.

Foster Family Home Records [11-800-54]

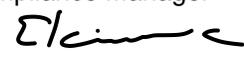
54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

54.(c)(2): No evidence present in client records of POA signature of client's service plan for client #1 and #2. Service plan without signature dated 5/13/2025 for client #1 and 8/23/2025 and 2/09/2025 for client #2.



Compliance Manager



Primary Care Giver



Date



Date

CTA RN Compliance Manager: Ryan Nakamura

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

PCG's Name on CCFFH Certificate: ERLINDA KIMURA, RN
(PLEASE PRINT)

CCFFH Address: 17 LIHI WAY WAHIAWA HAWAII 96786
(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)	PREPARED CLIENT 1, 2 AND 3's DOCUMENTS RELATED TO MONITORING AND SERVICE PLAN TO BE SIGNED BY CLIENT'S POA IF APPLICABLE.	11/05/25	WILL HAVE STAND-BY/READY-TO-PRINT DOCUMENTS TO BE TIMELY PROVIDED TO EACH CLIENTS POA WHEN APPLICABLE.
49.(b)(3)	GATHERED SIGNED WRITTEN CONSENT FROM EACH CLIENT'S POA TO USE CCTV/MONITORING EQUIPMENT.	11/05/25	WILL NOTIFY CLIENT'S POA FOR CHANGES RELATED TO CLIENT'S MONITORING/PRIVACY AND WILL FORMALLY REQUEST FOR A WRITTEN CONSENT PRIOR THE CHANGE.
54.(c)(2)	MADE SURE THAT THE PLAN WAS SIGNED BY POA. CLIENT 1: 5/13/25 - SENT/SIGNED *DOCUMENT IN TRANSIT FROM POA CLIENT 2: 8/23/25 - SENT/SIGNED *DOCUMENT IN TRANSIT FROM POA *2/9/25 - SIGNED/ATTACHED	11/05/25	IF THE SERVICE PLAN CHANGES/RENEWS - WILL IMMEDIATELY COMMUNICATE WITH CLIENT'S POA FOR REVIEW AND APPROVAL/SIGNATURE.

All items that were corrected are attached to this POC

PCG's Signature: Erlinda Kimura

Date: 11-12-25

CTA has reviewed all corrected items