

Foster Family Home - Deficiency Report

Provider ID: 1-120074

Home Name: Jovelyn Garces, CNA

Review ID: 1-120074-22

2256 Akeukeu Street

Reviewer: Maribel Nakamine

Pearl City HI 96782

Begin Date: 12/15/2025

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 visit made for a 3-bed recertification inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days of inspection (issued on 12/15/25).

Foster Family Home Medication and Nutrition [11-800-47]

47.(d) Use of physical or chemical restraints shall be:

47.(d)(1) By order of a physician;

47.(d)(2) Reflected in the client's service plan; and

47.(d)(3) Based on an assessment that includes the consideration of less restrictive restraint alternatives

Comment:

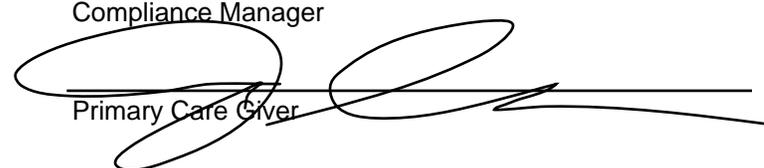
47.(d), (1), (2), (3)- Client #1 with use of glove to Right hand to prevent client from scratching. No MD order present; not addressed in client's Service Plan/HAP dated 8/23/25. No evidence of documented release and monitoring of site.

Foster Family Home Records [11-800-54]

54.(c)(5) Medication schedule checklist;

Comment:

54.(c)(5)- Client #3's Medication Administration Records (MARs) for the months of October 2025, November 2025, and December 2025 without the month and year written for each month.


Compliance Manager

Primary Care Giver

Date 12/15/25
Date 12/15/25

CTA RN Compliance Manager: Maribel Nakamine

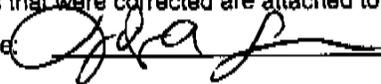
Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800

PCG's Name on CCFFH Certificate: Jovelyn Garces
(PLEASE PRINT)

CCFFH Address: 2256 Akeukeu St. Pearl City Hawaii 96782
(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?
47.(d),(1),(2),(3)	MD order was obtained , service plan was updated by CMA, restraint log sheet was made for client # 1. It was now placed into client's chart.		PCG will get MD order and will notify CMA that service plan needs to be done for new orders and PCG will make sure to have a daily log in sheet when restraint was on and off.
54.(c)(5)	Lapse cannot be corrected.		PCG will double check and make sure that MAR are filled up completely.

All items that were corrected are attached to this POC

PCG's Signature: 

Date: 1/4/26

CTA has reviewed all corrected items

101821 S. Young