

# Foster Family Home - Deficiency Report

Provider ID: 1-511362

Home Name: Milagrina Lim, CNA

Review ID: 1-511362-19

94-682 Kamalo Street

Reviewer: Deborah Baumgart

Waipahu HI 96797

Begin Date: 11/24/2025

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1- Unannounced visit made for a 2-bed annual inspection.

Deficiency Report issued during CCFFH inspection with plan of correction due to CTA within 30 days of inspection (issued on 11/24/2025)

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

Comment:

41.(b)(7)-CG#1 TB clearance lapsed 5/22/2025 no current results in binder. CG#5 TB clearance lapsed 5/15/2025 with no current results in binder.



11/24/25  
11/27/25

CTA RN Compliance Manager: Deborah Baumgart

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

PCG's Name on CCFFH Certificate: Milagrina Lim  
**(PLEASE PRINT)**

CCFFH Address: 94-682 Kamalo Street, Waipahu, HI, 96797  
**(PLEASE PRINT)**

<b>Rule Number</b>	<b>Corrective Action Taken – How was each issue fixed for each violation?</b>	<b>Date each violation was fixed</b>	<b>Prevention Strategy – How will you prevent each violation from happening again in the future?</b>
41.(b)(7)	CG #1 TB clearance was completed on 3/17/2025. It was due on 5/22/2025. CG #5 TB clearance was completed on 5/7/2025. It was due on 5/15/2025. Both documents were misplaced.	1/7/2026	Home will file documents right away and keep it organized in home binder.

All items that were corrected are attached to this POC

PCG's Signature: *Milagrina Lim*

Date: 1/14/2026

CTA has reviewed all corrected items