

# Foster Family Home - Deficiency Report

Provider ID: 4-100031

Home Name: Mineriza Pascua, CNA  
1588 Piikea Street  
Honolulu HI 96818

Review ID: 4-100031-24  
Reviewer: Deborah Baumgart  
Begin Date: 3/2/2026

**Foster Family Home Required Certificate [11-800-6]**

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

d.1- Unannounced visit made for a 3-bed annual inspection.

Deficiency Report issued during CCFH inspection with plan of correction due to CTA within 10 business days of inspection (issued on 03/2/2026)

**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

Comment:

8.(a)(2)-CG#2 APS/CAN lapsed on 11/14/2025 and was done 1/15/2026.

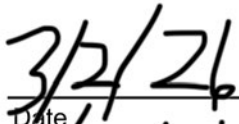
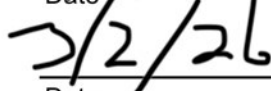
**Foster Family Home Personnel and Staffing [11-800-41]**

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

Comment:

41.(b)(7)-CG#2 TB clearance lapsed 4/13/2025 and was done 11/28/2025.

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

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

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:

Mineriza PASUMA  
(PLEASE PRINT)

CCFFH Address:

1588 Pike St. Honolulu HI 96818  
(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)    | Lapse cannot be corrected  | 03/02/26                      | PCG will be place sign on the front of the refrigerator, so that it is always visible will <del>she</del> schedule 2 week in advance. |
| 41.(b)(1)   | Lapse cannot be corrected  | 03/02/26                      | PCG, will use sticky notes on the binder, will schedule 2 weeks prior to the expiration date.   |

All items that were corrected are attached to this POC

PCG's Signature:

[Signature]

Date:

3/2/24

CTA has reviewed all corrected items