

Foster Family Home - Deficiency Report

Provider ID: 1-240012

Home Name: Remedios Molina, CNA

Review ID: 1-240012-5

94-510 Hiahia Loop

Reviewer: Ryan Nakamura

Waipahu

HI 96797

Begin Date: 11/24/2025

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 2 bed CCFFH recertification. Report issued during CCFFH inspection with written plan of correction due to CTA within 30 days of inspection (inspection date: 11/24/2025).

CCFFH applied to increase to 3 bed CCFFH.

3 Person Staffing 3 Person Staffing Requirements (3P) Staff

(3P)(a)(4) Staff A current Certified Nurses Aide or Nurse Aide certificate plus one year of experience in a home setting. If the certificate is expiring within the next 30 days, evidence of a new certificate must be provided. Substitute caregivers have a minimum of one year work experience as a caregiver in a community residential setting or in a medical facility, per 321-483(b)(4)(E) HRS.

Comment:

(3P)(a)(3) Staff: CCFFH applied to increase to 3 bed CCFFH. There was no job experience form present for CG#3 and CG#5.

Foster Family Home Client Care and Services [11-800-43]

43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3): No evidence present in client records of RN delegations given by client #1's case management for rectal suppository medication administration for all caregivers.



Compliance Manager



Primary Care Giver

11/24/25
Date
11/24/25
Date

CTA RN Compliance Manager:

RYAN NAKAMURA, RN

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

PCG's Name on CCFFH Certificate: REMEIDOL MOLINA, CNA

(PLEASE PRINT)

CCFFH Address: 94-510 HIAHIA LOOP WAIKIKAI HI 96797 HI

(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?
39.A.3	Coordinate caregivers to complete missing documents. Attached documents to home record.	12/31/2025 CG#1 12/16/2025 CG#1	Home will check the home record monthly and notify SCC's if there is missing documents.
43.C.3	Coordinate client's CMA to complete document attached to client's records.	11/29/2025 CLIENT#1	Home will check client's folder monthly and will notify CMA if there is missing documents.

All items that were corrected are attached to this POC

PCG's Signature: *R. Nakamura*

Date: 12/18/2025

CTA has reviewed all corrected items