

Foster Family Home - Deficiency Report

Provider ID: 1-260021

Home Name: Reign Goddilaize Salomes Mercado

Review ID: 1-260021-1

94-770 Kaaholo St

Reviewer: Laurie Vosler

waipahu

HI 96797

Begin Date: 4/16/2026

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

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

Comment:

6.(d)(1) – CCFFH inspection conducted for a new 2 bed CCFFH certification. Report issued during CCFFH inspection with written plan of correction due to CTA by 04/30/2026.

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

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

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

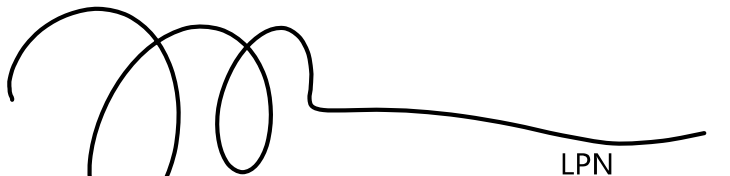
41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(b)(7) CCFFH did not have evidence of current TB clearance on approved Department of Health Form for CG# 1

41.(b)(8) CCFFH did not have evidence of Bloodborne Pathogen/Infection control training for CG# 1 & 2.

41.(f)(1) No current TB clearance for HHM# 1. TB clearance was due on or before 09/03/2025 and was completed 09/03/2021.

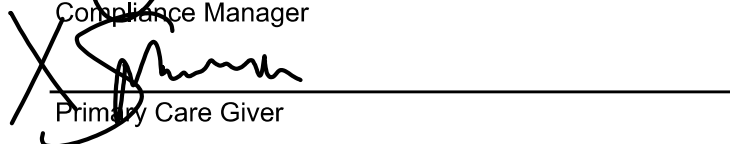


LPN

Compliance Manager

04/16/2026

Date



Primary Care Giver

04/16/2026

Date

CTA RN Compliance Manager: Laurie Vosler

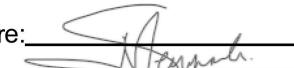
**Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800**

PCG's Name on CCFFH Certificate: Reign Goddilaize Salomes Mercado
(PLEASE PRINT)

CCFFH Address: 94-770 Kaaholo St. Waipahu HI 96797
(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?
41.(b)(7)	Upon notification of violation regarding missing mandatory health documentation, CG#1 Immediately initiated the clearance process at Lanakila Health Center. All three forms are scheduled to be signed by the healthcare provider by Monday, April 20, 2026.	04/17/26	To prevent future occurrences, a tracking log has been established. This log includes the expiration dates of all required health clearances for all caregivers and household members.
41.(b)(8)	CG#1 &2 completed the training in December 2025, but CG#1 forgot to put the new certificates in the binder. As soon as CG#1 was notified about the expired certificates, CG#1 find the updated one and put it in the binder. CG#1 will also send copies to the licensing agency to show that it is up to date.	4/17/26	To make sure this doesn't happen again, I will put new certificates in the binder the same day I finish a class. I will also check my folders every three months to make sure all my paperwork is current.
41.(f)(1)	HHM#1 went to the Lanakila Health Center and completed all the required TB testing. The current, signed TB clearance document has been obtained and is now placed in the household member's file. A copy of this clearance will be sent to the licensing agency to fix the violation.	4/17/26	I have listed all the expiration dates of every person living in the home and every caregiver. I will check this tracking log the first of every month and schedule appointments 60 days before any clearances expires.

All items that were corrected are attached to this POC

PCG's Signature:  Date: 04/18/2026

CTA has reviewed all corrected items