

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: <b>ALDE Care Home</b>	<b>CHAPTER 100.1</b>
Address: <b>94-1475 Hiapo Street, Waipahu, Hawaii 96797</b>	Inspection Date: <b>August 17, 2015 Annual</b>

Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/> §11-100.1-14 Food sanitation. (c) Refrigerators shall be equipped with an appropriate thermometer and temperature shall be maintained at 45°F or lower. <b>FINDINGS</b> Refrigerator thermometer read 55° Fahrenheit.	I adjusted the thermostat in the refrigerator and I will check it occasionally, and in two weeks to make sure it is 45°F or below	8-17-15

Licensee/Administrator's Signature: Debra A. Longino  
 Print Name: DEBRA A. LONGINO  
 Date: 8-17-15