

ADCC Name: Pearl City Hale ADCC

Community Ties of America, Inc
45-955 Kamehameha Highway, Suite 300
Kaneohe, HI 96744

Compliance Manager Name:

Address: 858 Second St.
Pearl City, HI 96782

**Adult Day Care Center (ADCC)
Deficiency Report**

Date of Review: 10/17/2016		Date Corrective Action Plan is Due:	End Date:
Check Item	H.A.R. 17-1424 Chapter #	Chapter Heading	Rule # and Non-Compliance findings
	3	Application for Certificate of Approval	
	11	Administration	
	12	Personnel and Staffing	
	13	Admissions	
	14	Participant Fees	
	15	Transportation	
	16	Services for Center Participants	
	17	Physical Location	
	18	Fire Protection	
	19	Other Disasters and Evacuations	

The CTA Compliance Manager has reviewed the above items with me and has provided me with a copy of this form. It is my responsibility to correct all items listed above and provide a written plan of correction to CTA within the timeframe stated above.

If this box is checked then I understand that I met all requirements and no corrective action is required

PRINT NAME:

CHRESTHEUS ROSARIO

SIGNATURE:

Date: 10/17/16

Compliance Manager Signature