Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Holy Family ARCH I	CHAPTER 100.1
Address: 47-410 Ahuimanu Road, Kaneohe, Hawaii 96744	Inspection Date: December 21, 2016

	Rules (Criteria)	Plan of Correction	Completion Date
\boxtimes	NO DEFICIENCIES	NOT APPLICABLE (NA)	NA NA
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