

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Medy's ARCH I, Inc.	CHAPTER 100.1
Address: 1447 Ala Leleu Street, Honolulu, Hawaii 96818	Inspection Date: October 17, 2018 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	NO DEFICIENCIES	NOT APPLICABLE (NA)	NA