ADCC Name: Live Well At Iwilei by Kahala Nui

Community Ties of America 45-955 Kamehameha Highway, Suite 300 Kaneohe, HI 96744 Compliance Manager Name: Deborah Baumgart LPN

Address: 888 Iwilei Road Honolulu, Hawaii 96817

Adult Day Care Center (ADCC) Recertification Deficiency Report

6117/2021		Date Corrective Action Plan is Due:	RECERTIFICATION INSPECTION	
Check Item	H.A.R. 17-1424 Chapter #	Chapter Heading	Rule # and Non-Compliance findings	
ок	3	Application for Certificate of Approval		
ок	11	Administration		
ок	12	Personnel and Staffing		
ок	13	Admissions		
ок	14	Participant Fees		
ок	15	Transportation		
ок	16	Services for Center Participants		
ок	17	Physical Location		
ок	18	Fire Protection		
ок	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.

	d then I understand that I met all requirements and no corre	ective action is required	
SIGNATURE:	rym nakameto	Date: (e(17/2)	
Compliance Manger Signature	Dehr By	Date: 4/17/21	_