## Office of Health Care Assurance

## **State Licensing Section**

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Pascual, Marissa	CHAPTER 100.1
Address: 45-220 Namoku Street, Kancohe, Hawaii 96744	Inspection Date: March 30, 2021

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