

Foster Family Home - Deficiency Report

Provider ID: 1-512906

Home Name: Belinda Galinato, LPN

Review ID: 1-512906-9

94-653 Kupuna Loop

Reviewer: Jackie Chamberlain

Waipahu HI 96797

Begin Date: 7/29/2021


Foster Family Home **Required Certificate** **[11-800-6]**

6.(d)(1) Comply with all applicable requirements in this chapter; and

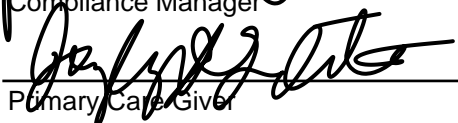
Comment:

6(d)(1) CCFFH inspection made for a 2 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

No corrective action required.



Compliance Manager



Primary Care Giver

7/29/21
Date

7/29/21
Date