

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Agency's Name: Hookele Caregivers Maui	CHAPTER 700
Address: 820 Mililani Street, Suite 711, Honolulu, Hawaii 96813	Inspection Date: March 18, 2021 Biennial (Office) and March 19, 2021 (Home)

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