

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Macaraeg D Dom Home	CHAPTER 89
Address: 94-262 Kahuahale Street, Waipahu, 96797	Inspection Date: June 18, 2021 Annual

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