

Foster Family Home - Deficiency Report

Provider ID: 1-560963

Home Name: Ruby Balantac, RN

Review ID: 1-560963-8

94-1014 Halekapio Street

Reviewer: Julie Hastings

Waipahu HI 96797

Begin Date: 7/16/2021

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

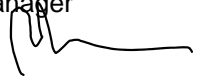
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1)
Home inspection completed for a 2 person CCFFH recertification.
-Home is in compliance with all requirements. Home will receive a 2 bed certification.



Compliance Manager



Primary Care Giver

7/16/2021

Date

7/16/2021

Date