Foster Family Home - Deficiency Report

Provider ID: 1-563975

Home Name: Jeanette Liggayu, CNA Review ID: 1-563975-10

91-1267 Hoopio Street Reviewer: Jackie Chamberlain

Ewa Beach HI 96706 Begin Date: 8/12/2021

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 3 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

Primary Care Giver

Date

Date

8/12/2021 11:55:01 AM

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