

Foster Family Home - Deficiency Report

Provider ID: 2-590366

Home Name: Ethel Ah Lo, CNA

Review ID: 2-590366-11

995 Mililani Street

Reviewer: David Ayling

Hilo HI 96720

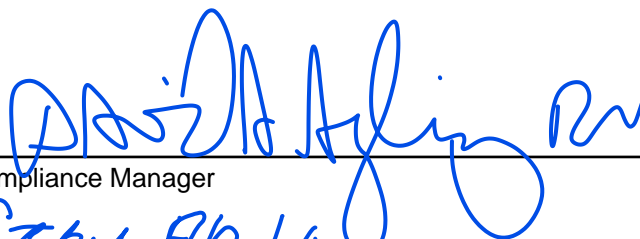
Begin Date: 9/16/2021

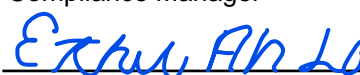
Foster Family Home **Required Certificate** **[11-800-6]**

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

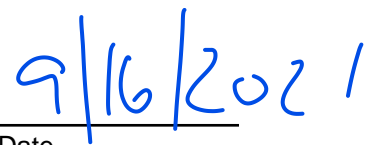
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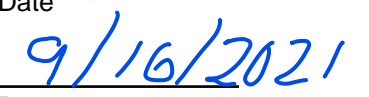
6.(d)(1) - Home inspection for a 3 person CCFFH recertification. All requirements were met at the time of inspection. Home will receive a 3 bed certification.



Compliance Manager


Primary Care Giver



Date


Date