

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Joy S. Alconcel	CHAPTER 100.1
Address: 339-A Elelupe Road, Honolulu, Hawaii, 96821	Inspection Date: July 27, 2021 Annual

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