

Foster Family Home - Deficiency Report

Provider ID: 1-590358

Home Name: Andrea Paeste, RN

Review ID: 1-590358-10

91-212 Haawina Place

Reviewer: Jackie Chamberlain

Kapolei HI 96707

Begin Date: 12/16/2021


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

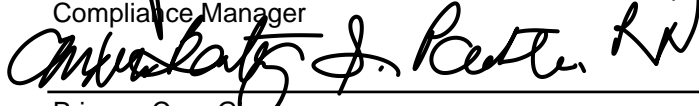
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

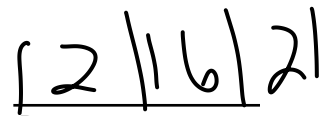
6(d)(1) CCFFH inspection made for a 2 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

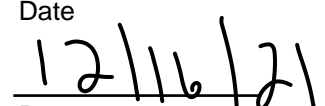
No corrective action required.



Compliance Manager


Primary Care Giver



Date


Date