

Foster Family Home - Deficiency Report

Provider ID: 1-564428

Home Name: Nancy Modumo, CNA

Review ID: 1-564428-10

91-1088 Kaunolu Street

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 11/29/2021

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 annual inspection. CCFFH met all compliance requirements at the time of the CCFFH inspection. No corrective action required.

Jackie Chamberlain RN
Compliance Manager
Nancy Modumo
Primary Care Giver

11/30/21
Date
11/30/21
Date