

Foster Family Home - Deficiency Report

Provider ID: 1-586977

Home Name: Abundia Tagaro, CNA

Review ID: 1-586977-9

92-522 Awawa Street

Reviewer: Jackie Chamberlain

Kapolei HI 96707

Begin Date: 2/9/2022

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

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

Comment:

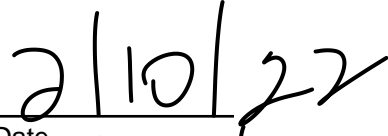
6(d)(1) CCFFH inspection made for a 3 bed annual inspection. CCFFH met all compliance requirements at the time of the CCFFH inspection. No corrective action required.




Compliance Manager



Primary Care Giver



Date



Date