

Foster Family Home - Deficiency Report

Provider ID: 1-150024

Home Name: Charisma Domingo, CNA

Review ID: 1-150024-11

87-1017 Huamoa Street

Reviewer: Jackie Chamberlain

Waianae HI 96792

Begin Date: 3/15/2022


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

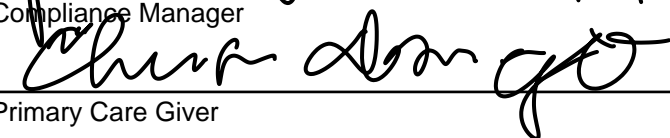
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) CCFFH inspection made for a 3 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

No Deficiency Report issued.



Compliance Manager


Primary Care Giver

3/15/22

Date
3/15/22

Date