

# Foster Family Home - Deficiency Report

Provider ID: 1-210036

Home Name: Maricel Corpuz, CNA

Review ID: 1-210036-3

94-972 Lumiloke Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 2/9/2022

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1- Unannounced recertification inspection conducted.

CCFFH is in compliance with all requirements. CCFFH will receive a 2-bed certification.

Maribel Nakamine, RN 2/9/22  
Compliance Manager Date  
Esther Corpuz for Maricel 2/9/22  
Primary Care Giver Date  
Corpuz