Foster Family Home - Deficiency Report

Provider ID: 1-210035

Home Name: Princess Abarca, CNA Review ID: 1-210035-3

94-1285 Huakai Street Reviewer: Jackie Chamberlain

Waipahu HI 96797 Begin Date: 2/8/2022

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 2 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

No corrective action required.

Primary Care Giver

Date

Date

2/8/2022 1:21:13 PM

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