

Foster Family Home - Deficiency Report

Provider ID: 1-140044

Home Name: Maricel Ballares Lutrania, NA

Review ID: 1-140044-10

94-1065 Lumiauau Street

Reviewer: Jackie Chamberlain

Waipahu

HI 96797

Begin Date: 3/30/2022

Foster Family Home

Required Certificate


[11-800-6]

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

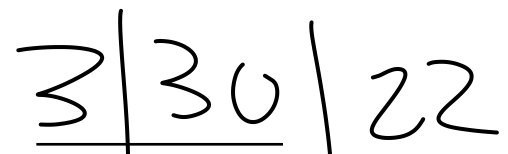
Comment:

6(d)(1) CCFFH inspection made for a 2 bed annual inspection. CCFFH met all compliance requirements at the time of the CCFFH inspection. No corrective action required.

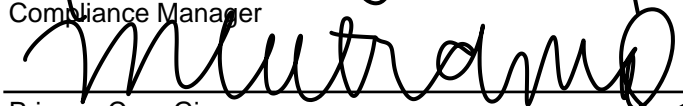
CCFFH has expected close date of 5/25/22

 RN


Compliance Manager



Date



Primary Care Giver



Date