

Foster Family Home - Deficiency Report

Provider ID: 1-509945

Home Name: Alma Acasio, CNA

Review ID: 1-509945-10

108 Kaniko Place

Reviewer: Maribel Nakamine

Wahiawa

HI 96786

Begin Date: 5/5/2022

Foster Family Home

Required Certificate

[11-800-6]

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

Comment:

6.d.1- Unannounced annual inspection conducted. No deficiencies noted.

CCFFH is in compliance with all requirements.

Maribel Nakamine, CW 5/5/22

Compliance Manager

Date

[Signature]
Primary Care Giver

Date

5/5/22