

Foster Family Home - Deficiency Report

Provider ID: 1-180049

Home Name: Venus Nino, CNA

Review ID: 1-180049-7

94-1067 Kahuamoku Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 6/23/2022

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 3-bed certification.

Maribel Nakamine, RN 6/23/22

Compliance Manager

Date

[Signature]

Primary Care Giver

Date

6/23/22