

Foster Family Home - Deficiency Report

Provider ID: 1-180074

Home Name: Rosemarie Glo B. Dalisay,
CNA

Review ID: 1-180074-8

91-1194 Hanaloa Street

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 8/2/2022

Foster Family Home

Required Certificate


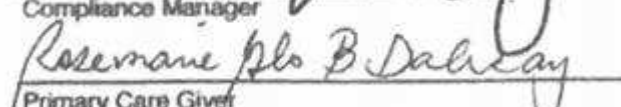
[11-800-6]

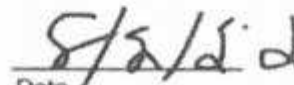
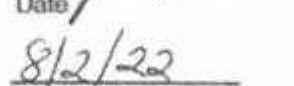
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

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

CCFFH is in compliance with all requirements.


Compliance Manager

Primary Care Giver


Date

Date