

Foster Family Home - Deficiency Report

Provider ID: 3-626070

Home Name: Almira Acasio, CNA

Review ID: 3-626070-15

76-6183 Holualoa Beach
Road

Reviewer: David Ayling

Kailua-Kona HI 96740

Begin Date: 7/19/2022

Foster Family Home

Required Certificate

[11-800-6]

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

Comment:

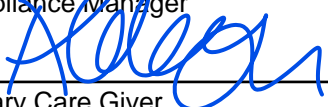
6.(d)(1) - Home inspection for a 3 person CCFFH certification. All requirements were met at the time of inspection. Home will receive a 2-bed certification.



Compliance Manager



Date



Primary Care Giver



Date