

Foster Family Home - Deficiency Report

Provider ID: 2-510679

Home Name: Helen Sapla, CNA

Review ID: 2-510679-11

88 Pakalana Street

Reviewer: David Ayling

Hilo HI 96720


Begin Date: 9/14/2022

Foster Family Home **Required Certificate** **[11-800-6]**

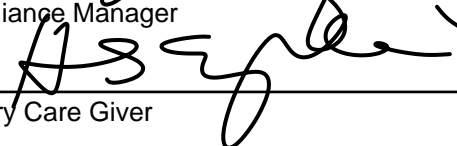
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

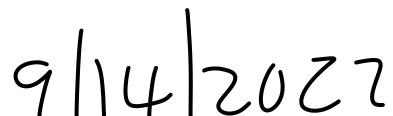
6.(d)(1) - Home inspection for a 3 person CCFFH recertification. All requirements were met at the time of inspection. Currently has only 1 client. Home will receive a 3-bed certification.



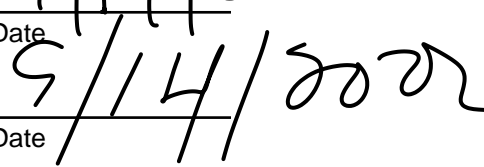
Compliance Manager



Primary Care Giver



Date



Date