

Foster Family Home - Deficiency Report

Provider ID: 1-587793

Home Name: Rebecca Dulatre, CNA

Review ID: 1-587793-15

86-401 Kawili Street

Reviewer: Jackie Chamberlain

Waianae HI 96792

Begin Date: 9/13/2022


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

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

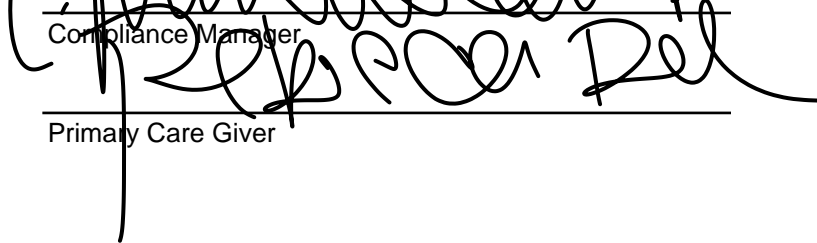
Comment:

6(d)(1) CCFFH inspection made for a 3 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

No plan of correction required.



Compliance Manager



Primary Care Giver

9/13/22

Date

9/13/22

Date