

Foster Family Home - Deficiency Report

Provider ID: 1-170074

Home Name: Dyan Peroche Clariz, CNA

Review ID: 1-170074-11

94-442 Hamau Street

Reviewer: Deborah Baumgart

Waipahu

HI 96797

Begin Date: 9/24/2022

Foster Family Home

Required Certificate


[11-800-6]

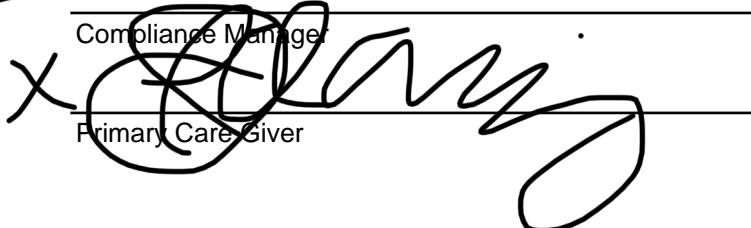
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

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

CCFFH is in compliance with all requirements.



Compliance Manager


Primary Care Giver

9/24/22

Date
9/24/22

Date