

Foster Family Home - Deficiency Report

Provider ID: 1-562563

Home Name: Nora Buccat, RN

Review ID: 1-562563-12

91-231 Kaukolu Place

Reviewer: Po Lim

Ewa Beach HI 96706


Begin Date: 9/12/2022

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


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

Comment:

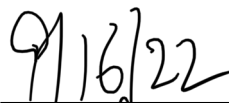
6(d)(1) Unannounced annual inspection made for a 2-bed recertification. CCFFH met all compliance requirements at the time of the inspection. No corrective action required.



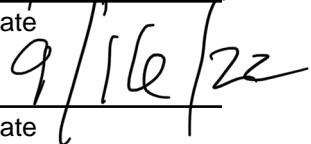
Compliance Manager



Primary Care Giver



Date



Date