

Foster Family Home - Deficiency Report

Provider ID: 1-210007

Home Name: Jasmin Sacamos, CNA

Review ID: 1-210007-5

91-947 Akaholo Street

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 10/27/2022

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

10/27/22

Date
10/27/22

Date