

# Foster Family Home - Deficiency Report

Provider ID: 1-562878

Home Name: Fe Dumlao, CNA

Review ID: 1-562878-13

91-865 Hamiha Place

Reviewer: Po Lim

Ewa Beach HI 96706



Begin Date: 10/26/2022

**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 recertification inspection made for a 3-bed recertification. CCFFH met all compliance requirements at the time of the inspection. No corrective action required.

  
\_\_\_\_\_  
Compliance Manager  
  
\_\_\_\_\_  
Primary Care Giver

10/26/22  
\_\_\_\_\_  
Date  
10/26/22  
\_\_\_\_\_  
Date