

Foster Family Home - Deficiency Report

Provider ID: 1-190016

Home Name: Leilani Rondon, CNA

Review ID: 1-190016-9

91-866 Hahanui Street

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 12/6/2022

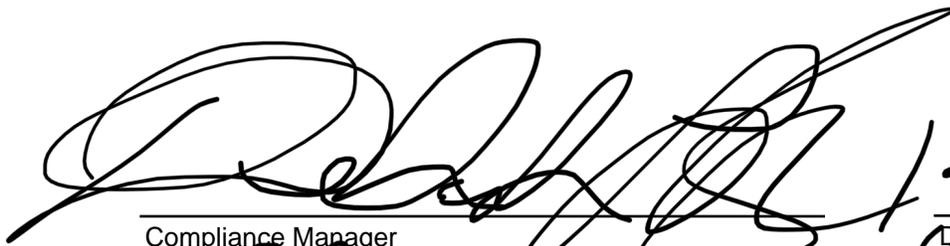
Foster Family Home **Required Certificate** **[11-800-6]**

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 12/6/22
Date



Primary Care Giver 12/6/22
Date