

# Foster Family Home - Deficiency Report

Provider ID: 1-110026

Home Name: Osmenia Aquino, CNA

Review ID: 1-110026-11

94-1111 Awaiki Street

Reviewer: David Ayling

Waipahu HI 96797

Begin Date: 11/29/2022

Foster Family Home

Required Certificate

[11-800-6]

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

Comment:

6.(d)(1) - Annual unannounced inspection made today. Completed annual review. No deficiencies.

David Ayling  
Compliance Manager

Primary Care Giver

11/29/2022  
Date

11/29/22  
Date

11/29/2022 12:37:54 PM