

Foster Family Home - Deficiency Report

Provider ID: 4-130022

Home Name: Edita Domingo, CNA

Review ID: 4-130022-13

141 Puukani Street

Reviewer: Terri Van Houten

Kahului HI 96732

Begin Date: 3/23/2023

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

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

Comment:

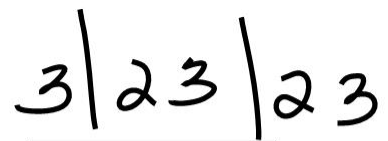
6.(d)(1) – Unannounced CCFFH inspection made for a 2 bed CCFFH recertification. CCFFH met all compliance requirements at the time of the inspection. No corrective action required.

No clients admitted to CCFFH at time of inspection.

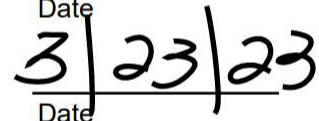


Compliance Manager

Primary Care Giver



Date



Date