

# Foster Family Home - Deficiency Report

Provider ID: 1-160087

Home Name: Ronald Joaquin

Review ID: 1-160087-1

94-770 Kaiao Street

Reviewer: David Ayling

Waipahu HI 96797

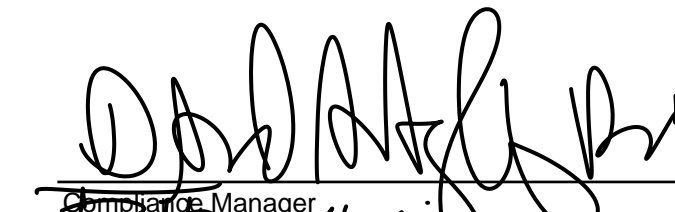
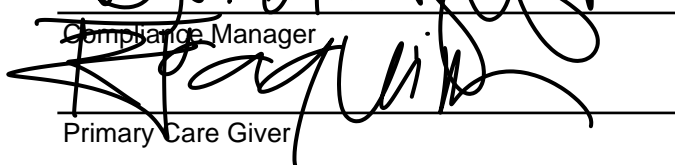
Begin Date: 3/29/2023

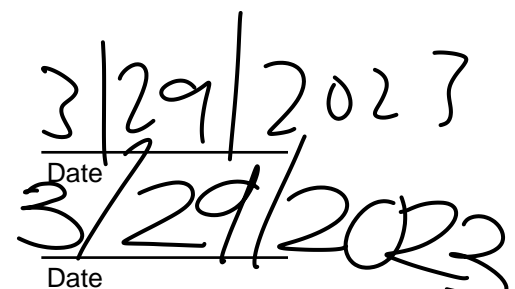
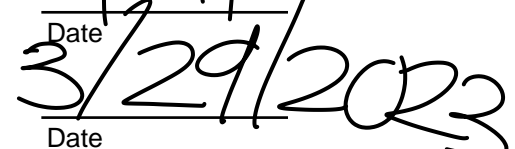
Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Home inspection for a new 2 person CCFFH certification. All requirements were met at the time of inspection. Home will receive a 2-bed certification.

  
Compliance Manager  
  
Primary Care Giver

  
Date  
  
Date