Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Hale 'Olu Care Home L.L.C.	CHAPTER 100.1
Address:	Inspection Date: January 24, 2023 Annual
1573 Ala Lani Street, Honolulu, Hawaii 96819	

Rules (Criteria)	Plan of Correction	Completion Date
NO DEFICIENCIES	NOT APPLICABLE (NA)	NA NA