Foster Family Home - Deficiency Report

Provider ID: 2-130042

Home Name: Romeo Salom, Jr., CNA **Review ID:** 2-130042-14 479 Luakaha Street Reviewer: David Ayling Hilo Н 6/12/2023 96720 Begin Date:

Foster Family H	ome Red	quired 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.

Primary Care Giver