Foster Family Home - Deficiency Report

Provider ID:

1-558976

Home Name:

Vising Santiago, CNA

Review ID:

1-558976-14

41-565 Inoaole Street

Reviewer:

Jackie Chamberlain

Waimanalo

HI 96795

Begin Date:

6/14/2023

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter, and

Comment:

6(d)(1) CCFFH inspection made for a 2 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

No plan of correction required.

Compliance Manager

Primary Care Giver

Date

Data

Page 1 of 1