

Foster Family Home - Deficiency Report

Provider ID: 2-170080

Home Name: Mary Ann Balanay, CNA

Review ID: 2-170080-11

81-1989 Haku Nui Road

Reviewer: David Ayling

Captain Cook HI 96704

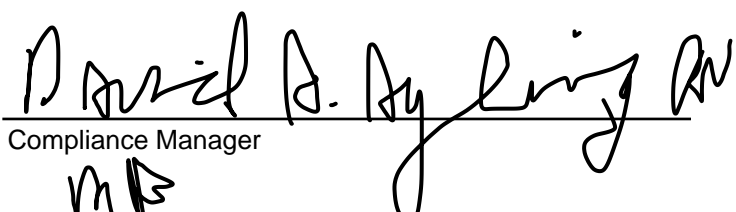
Begin Date: 8/1/2023

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

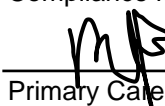
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

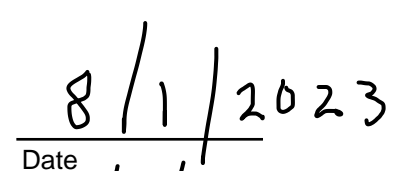
6.(d)(1) - Annual unannounced inspection made today. Completed annual review. No deficiencies.



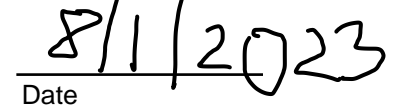
Compliance Manager



Primary Care Giver



Date



Date