

Foster Family Home - Deficiency Report

Provider ID: 1-510562

Home Name: Adeline Caraang, CNA

Review ID: 1-510562-13

91-976 Fort Weaver Road

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 7/21/2023


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

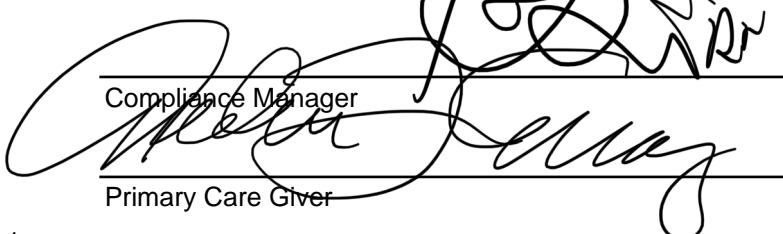
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

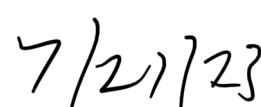
6(d)(1) Unannounced visit made for a 2 bed re-certification inspection.

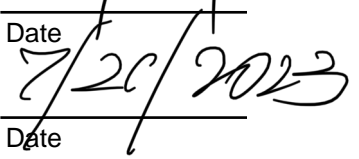
CCFFH met all requirements at the time of the inspection.



Compliance Manager


Primary Care Giver



Date


Date