

Foster Family Home - Deficiency Report

Provider ID: 1-190093

Home Name: Arturo Borres Jr., CNA

Review ID: 1-190093-9

104 Uluwale Place

Reviewer: Maribel Nakamine

Wahiawa

HI

96786

Begin Date: 8/9/2023

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 3-bed recertification inspection.

CCFFH met all requirements at the time of inspection.

Maribel Nakamine, RN

Compliance Manager

Primary Care Giver

Date

Date

8/9/2023 3:44:50 PM