

# Foster Family Home - Deficiency Report

Provider ID: 1-509432

Home Name: Dominador Balinbin, CNA

Review ID: 1-509432-5

94-1034 Paiwa Place

Reviewer: David Ayling

Waipahu

HI

96797

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) - Home inspection for a new 2 person CCFFH certification. All requirements were met at the time of inspection. Home will receive a 2-bed certification.

David A. Ayling RN 7/21/2023  
Compliance Manager Date  
Dominador Balinbin 7/21/2023  
Primary Care Giver Date