Foster Family Home - Deficiency Report

Provider ID: 2-509870

Home Name:Myrna Caro, RNReview ID:2-509870-131766 Kaiwiki RoadReviewer:David AylingHiloHI96720Begin Date:8/15/2023

Foster Family H	ome Red	quired Certificate	11-800-6]

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

Comment:

6.(d)(1) - Home inspection for a 3 person CCFFH recertification. All requirements were met at the time of inspection. Home will receive a 3-bed certification.

Compliance Manager

Gi**y**er

Date 75/73

Date

8/15/2023 11:27:23 AM