

Foster Family Home - Deficiency Report

Provider ID: 1-190044

Home Name: Nina Myra Badua, CNA

Review ID: 1-190044-8

91-1307 Maliko Street

Reviewer: Jackie Chamberlain

Ewa Beach

HI 96706

Begin Date: 2/13/2023

Foster Family Home

Required Certificate


[11-800-6]


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

Comment:

6(d)(1) CCFFH inspection made for a 3 bed re-certification. CCFFH met all compliance requirements at the time of the CCFFH inspection.

No plan of correction required.



Compliance Manager
✓ 

Primary Care Giver

2/13/23
Date
2/13/23
Date