

Foster Family Home - Deficiency Report

Provider ID: 2-140078

Home Name: Edgar Chua Bartolome, CNA

Review ID: 2-140078-13

28-2884 Kaakepa Street

Reviewer: David Ayling

Pepeekeo HI 96783

Begin Date: 9/11/2023

Foster Family Home


Required Certificate

[11-800-6]

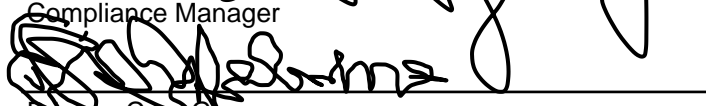
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Annual unannounced inspection made today. Completed annual review. No deficiencies.



Compliance Manager



Primary Care Giver

9/11/2023
Date

9-11-2023
Date