## Office of Health Care Assurance

## **State Licensing Section**

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Hale Malamalama Mauka	CHAPTER 100.1
Address: 246 Moomuku Place Honolulu, Hawaii 96821	Inspection Date: May 5, 2023 Annual

Rules (Criteria)	Plan of Correction	Completion Date
NO DEFICIENCIES	NOT APPLICABLE (NA)	NA
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