

Foster Family Home - Deficiency Report

Provider ID: 1-230078

Home Name: Allan Sildora, NA

92-551 Palailai Street

Kapolei

HI 96707

Review ID: 1-230078-1

Reviewer: David Ayling

Begin Date: 10/27/2023

Foster Family Home

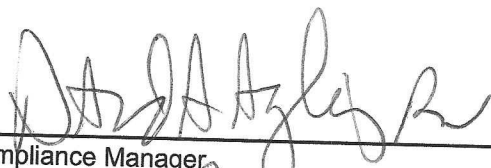
Required Certificate

[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.



Compliance Manager



Primary Care Giver

10/27/2023

Date

10-27-23

Date