## Office of Health Care Assurance

## **State Licensing Section**

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

| Facility's Name: Elisa Cabal (ARCH/Expanded ARCH) | CHAPTER 100.1                            |
|---|--|
| Address: 228 Hookano Street, Hilo, Hawaii 96720   | Inspection Date: October 20, 2023 Annual |

|             | Rules (Criteria) | Plan of Correction  | Completion<br>Date |
|-------------|------------------|---------------------|--------------------|
| $\boxtimes$ | NO DEFICIENCIES  | NOT APPLICABLE (NA) | NA                 |
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