

Foster Family Home - Deficiency Report

Provider ID: 1-230082

Home Name: Mary Jane Macadangdang, NA

Review ID: 1-230082-1

94-1147 Kaloli Loop

Reviewer: David Ayling

Waipahu

HI

96797

Begin Date: 11/27/2023

Foster Family Home

Required Certificate

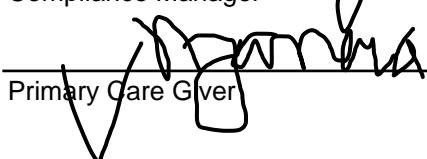
[11-800-6]

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.

David A. Ayling RN
Compliance Manager


Primary Care Giver

11/27/2023
Date

11/27/2023
Date