

Foster Family Home - Deficiency Report

Provider ID: 1-563933

Home Name: Elenita Vitug, CNA

Review ID: 1-563933-15

91-763 Kilipoe Street

Reviewer: Po Lim

Ewa Beach HI 96706

Begin Date: 3/27/2024

Foster Family Home **Required Certificate** **[11-800-6]**

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

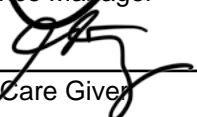
Comment:

6(d)(1) Unannounced visit made for a 2 bed re-certification inspection.

CCFFH met all requirements at the time of the inspection.



Compliance Manager



Primary Care Giver

3/27/2024
Date

3/27/2024
Date