## Office of Health Care Assurance

## **State Licensing Section**

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: F. Glenish J. Caraang	CHAPTER 89
Address: 94-477 Lianu Place, Waipahu, Hawaii 96797	Inspection Date: April 18, 2024 Annual

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