

Foster Family Home - Deficiency Report

Provider ID: 1-210057

Home Name: Mawicelica Balisacan, NA

Review ID: 1-210057-9

91-1000 Aeae Street

Reviewer: Deborah Baumgart

Ewa Beach

HI 96706

Begin Date: 4/26/2024

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 annual inspection.

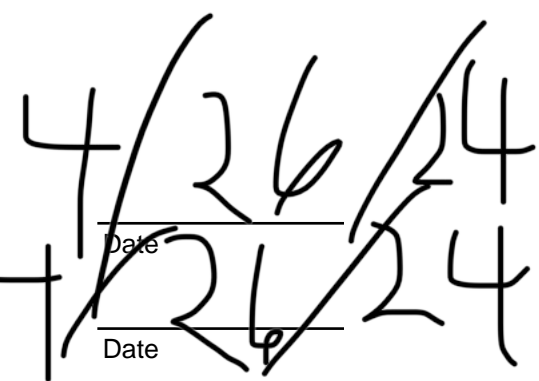
CCFFH met all requirements at the time of the inspection.



Handwritten signature of the Compliance Manager.

Compliance Manager

Primary Care Giver



Handwritten date: 4/26/24

Date

Date