

# Foster Family Home - Deficiency Report

Provider ID: 1-510562

Home Name: Adeline Caraang, CNA

Review ID: 1-510562-15

91-976 Fort Weaver Road

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 7/30/2024

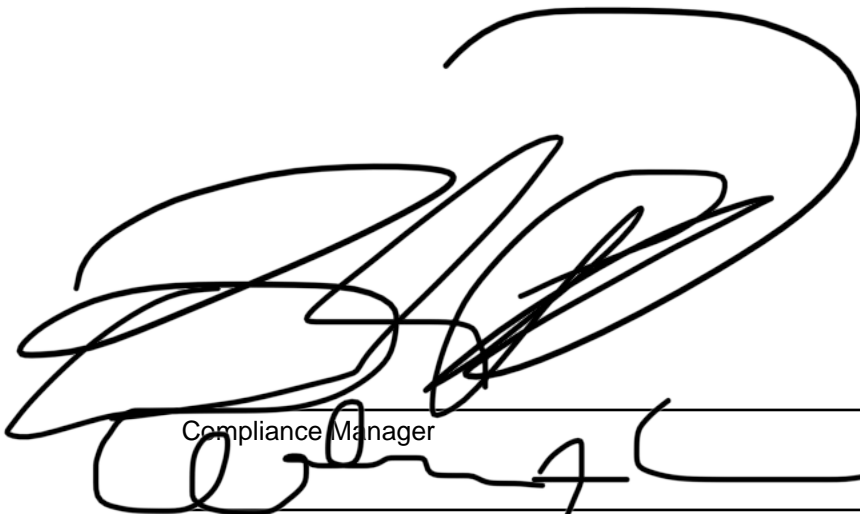
**Foster Family Home**      **Required Certificate**      **[11-800-6]**

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

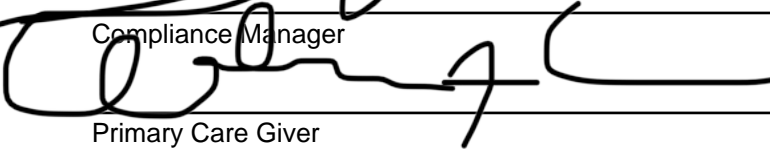
Comment:

6.d.1- Unannounced visit made for a 2-bed annual inspection.

CCFFH met all requirements at the time of the inspection.



Compliance Manager



Primary Care Giver

7/30/24  
Date  
7/30/24  
Date