

Jul.19.2024 12:12 PM

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Attention to:

Maribel Nakamine, RN

From: Edeus Agbalog

Foster Family Home - Deficiency Report

Provider ID: 2-120075

Home Name: Edeus Agbalog, CNA

Review ID: 2-120075-17

27-214 Molrton Camp Road B

Reviewer: Maribel Nakamine

Papaikou HI 96781

Begin Date: 7/10/2024

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 3-bed recertification inspection.

CCFFH met all requirements at the time of inspection.

<u>Maribel Nakamine, RN</u>	<u>7/10/24</u>
Compliance Manager	Date
<u>Edeus Agbalog</u>	<u>7/10/24</u>
Primary Care Giver	Date