Foster Family Home - Deficiency Report

Provider ID: 1-160086

Home Name: Kresta Jonadel Riveral, NA Review ID: 1-160086-16

91-936 Komana Street Reviewer: Po Lim
Ewa Beach HI 96706 Begin Date: 7/29/2024

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

7/29/2024

Date

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