

Foster Family Home - Deficiency Report

Provider ID: 1-210093

Home Name: Lady Anne Tagupa, CNA

Review ID: 1-210093-8

91-1010 Kupekala Street

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 9/19/2024

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

9/19/24

Date
9/19/24

Date