

Foster Family Home - Deficiency Report

Provider ID: 1-579576

Home Name: Luz Vea, CNA

Review ID: 1-579576-16

1582 Hoonipo Street

Reviewer: Maribel Nakamine

Pearl City HI 96782

Begin Date: 9/24/2024

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 recertification inspection.

CCFFH met all requirements at the time of inspection.

Maribel Nakamine, RN 9/24/24
Compliance Manager Date
Luz A Vea 9/24/24
Primary Care Giver Date