

Foster Family Home - Deficiency Report

Provider ID: 5-240008

Home Name: Jennifer Cezar-Oligo, CNA

Review ID: 5-240008-2

8900 Kekaha Road

Reviewer: Maribel Nakamine

Kekaha

HI 96752

Begin Date: 10/9/2024

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, CW 10/9/24
Compliance Manager
Date

[Signature] 10/9/24
Primary Care Giver
Date

10/9/2024 12:31:19 PM