

Foster Family Home - Deficiency Report

Provider ID: 2-240022

Home Name: Jane Carecio, CNA

Review ID: 2-240022-1

480 Hoopuni Street

Reviewer: David Ayling

Hilo HI 96720


Begin Date: 3/11/2024

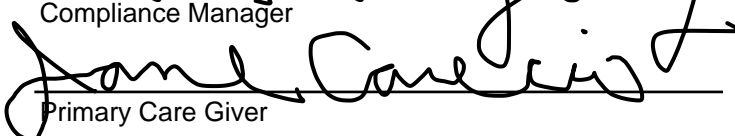
Foster Family Home **Required Certificate** **[11-800-6]**

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Home inspection for a new 1 person CCFFH certification. All requirements were met at the time of inspection. Home will receive a 2-bed certification.


Compliance Manager Date 3/11/2024


Primary Care Giver Date 3-11-2024