

Foster Family Home - Deficiency Report

Provider ID: 1-240025

Home Name: Josen Agcaoili, NA

Review ID: 1-240025-1

99-124 Pamoho Place

Reviewer: David Ayling

Aiea HI 96701

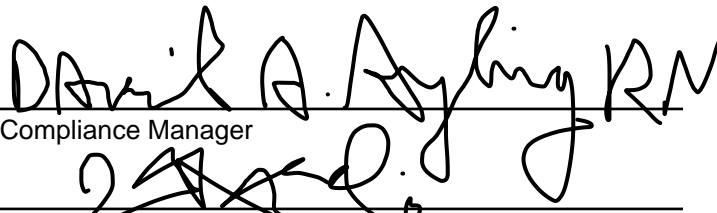
Begin Date: 4/11/2024

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


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

Comment:

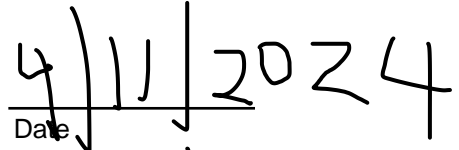
6.(d)(1) - Home inspection for a new 2 person CCFFH certification. All requirements were met at the time of inspection. Home will receive a 2-bed certification.



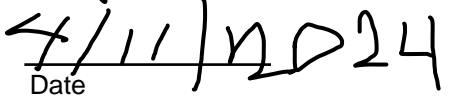
Compliance Manager



Primary Care Giver



Date



Date