

Foster Family Home - Deficiency Report

Provider ID: 1-240017

Home Name: Law Adrien Peroche, NA

Review ID: 1-240017-1

1423 Noelani Street

Reviewer: David Ayling

Pearl City HI 96782

Begin Date: 2/22/2024

Foster Family Home


Required Certificate


[11-800-6]

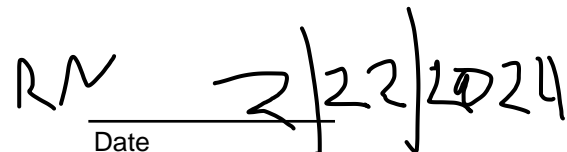
6.(d)(1) Comply with all applicable requirements in this chapter; and

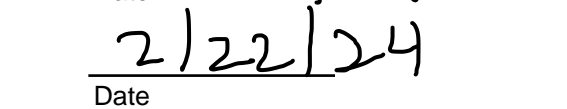
Comment:

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

RN 
Date 2/22/2024


Date 2/22/24