

Foster Family Home - Deficiency Report

Provider ID: 1-510992

Home Name: Lucrecia Baptista, CNA

Review ID: 1-510992-16

91-140 Hailipo Street

Reviewer: Deborah Baumgart

Ewa Beach HI 96706

Begin Date: 7/24/2025

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1- Unannounced visit made for a 3-bed annual inspection.

CCFFH met all requirements at the time of the inspection.


Compliance Manager


Primary Care Giver


Date

Date