

Foster Family Home - Deficiency Report

Provider ID: 1-588965

Home Name: Marlene Corpuz, CNA

Review ID: 1-588965-17

94-350 Kipou Place

Reviewer: Deborah Baumgart

Waipahu HI 96797

Begin Date: 7/25/2025


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

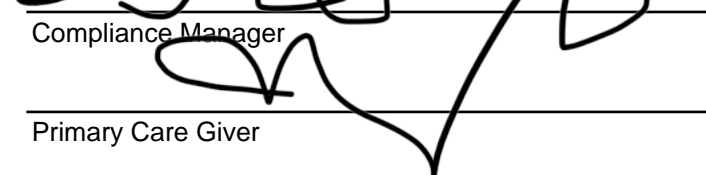
Comment:

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

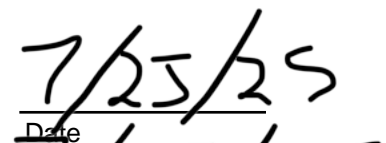
CCFFH met all requirements at the time of the inspection.



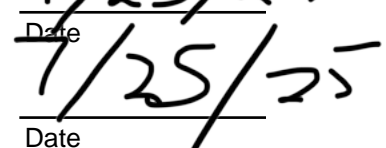
Compliance Manager



Primary Care Giver



Date



Date