

Foster Family Home - Deficiency Report

Provider ID: 1-230015

Home Name: Gloria Raval, NA

Review ID: 1-230015-7

94-1017 Awanani Street

Reviewer: Deborah Baumgart

Waipahu HI 96797

Begin Date: 12/17/2025


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

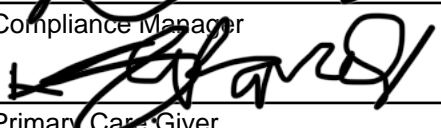
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1- Unannounced visit made for a 2-bed annual inspection.

CCFFH met all requirements at the time of the inspection.



Compliance Manager


Primary Care Giver

12/17/25

Date
12/17/25

Date