

Foster Family Home - Deficiency Report

Provider ID: 1-510976

Home Name: Teresita Pagtama, CNA

Review ID: 1-510976-18

94-468 Alpine Street

Reviewer: Deborah Baumgart

Waipahu HI 96797

Begin Date: 3/23/2026


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

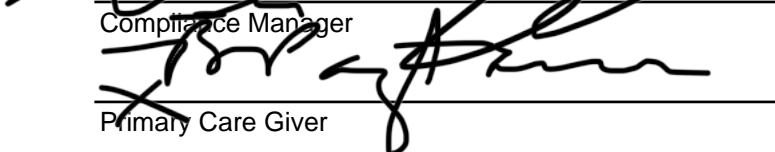
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:


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

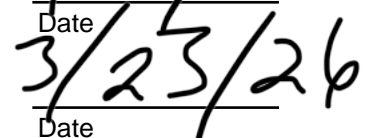
CCFFH met all requirements at the time of the inspection.



Compliance Manager


Primary Care Giver



Date


Date