

# Foster Family Home - Corrective Action Report

Provider ID: 1-100072

Home Name: Girlie Bigornia, CNA

Review ID: 1-100072-2

94-442 Alapine Street

Reviewer: [REDACTED]

Waipahu HI 96797

Begin Date: 5/5/2015

End Date: 5/16/2015

Foster Family Home Required Certificate [17-1454-6]

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

Comment:

6.(d)(1) Requirements at the time of the home visit. No corrective action required. Home is eligible for a 2 year 2 bed certification.

[REDACTED]  
Compliance Manager

Girlie Bigornia  
Primary Care Giver

5/5/2015  
Date

5/5/2015  
Date