

### Foster Family Home - Corrective Action Report

Provider ID: 1-814075

Home Name: Evelyn Arrocaena, CNA  
91-743 Aikanaka Road

Review ID: 1-814075-3

Reviewer:

Ewa Beach HI 96706

Begin Date: 7/28/2015

End Date: 7/31/15

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

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

Comment:

Home visit for a 2 person recertification review made on 7/28/15.

No Corrective Action Report issued during home visit. Home will receive a two year recertification

Compliance Manager

Ernesto Arrocaena

Date

7/28/15

Primary Care Giver

Ernesto Arrocaena

Date

7-28-15