

Foster Family Home - Corrective Action Report

Provider ID: 2-590366

Home Name: Ethel Ah Lo, CNA

Review ID: 2-590366-5

905 Mililani Street

Reviewer:

Hic HI 96720

Begin Date 9/15/2015

End Date: 9/15/15

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

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

Comment:

Home visit done on 9/15/15 to survey for recertification. Home in compliance on day of survey. Home is eligible for a two year recertification for three clients.

Compliance Manager

Ethel Winona Ah Lo

Primary Care Giver

9-15-15

Date

09-15-2015

Date

