

Foster Family Home - Corrective Action Report

Provider ID: 1-513376

Home Name: Pacita Agbisit, CNA

Review ID: 1-513376-4

94-1072 Lumina Street

Reviewer:

Waipahu HI 96797

Begin Date: 1/19/2016

End Date: 1/19/16

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 1/19/16. Home is in compliance with all requirements. Home will receive a 2 year 2 bed certification.

1/19/16
Date

1/19/16
Date