

Foster Family Home - Corrective Action Report

Provider ID: 1-561060

Home Name: Emma Balallo, CNA

Review ID: 1-561060-3

94-513 Hiahia Loop

Reviewer:

Waipahu

HI 96797

Begin Date: 7/5/2016

End Date:

7/5/16

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment:

Home visit [REDACTED] for recertification of 3 bed home. All requirements met at time of review. Home eligible for 2 year 3 bed certificate.