## Foster Family Home - Corrective Action Report

Provider ID:

1-591356

Home Name:

Gloria Aves, CNA

Review ID: 1-591356-5

98-1519 Hoomahie Lp.

Reviewer:

Pearl City

HI 96782

Begin Date: 6/16/2016

End Date: 6/16/16

**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 3 person recertification review

Home is in compliance with all requirements. Home will receive a 2 year 3 bed certification.



Page 1 of 1 6/16/2016 19:13 PM