

Foster Family Home - Corrective Action Report

Provider ID: 1-510588

Home Name: Lolita Agudelo, CNA

Review ID: 1-510588-4

94-998 Kuhaulua Street

Reviewer:

Waipahu HI 96797

Begin Date: 7/11/2016

End Date: 7/25/2016

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment:

6 (d)(1) Requirements at the time of the home visit [REDACTED]. No corrective action required. Home is eligible for a 2 year 2-bed certification.