

Foster Family Home - Corrective Action Report

Provider ID: 1-563785

Home Name: Melany Raralio, CNA

Review ID: 1-563785-3

92-766 Palailai Street

Reviewer:

Kapolei

HI 96707

Begin Date: 7/7/2016

End Date: 7/22/2016

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.