

Foster Family Home - Corrective Action Report

Provider ID: 2-559172

Home Name: Romeo Salom, CNA

Review ID: 2-559172-7

1257 Kumukoa Street

Reviewer:

Hilo

HI 96720

Begin Date: 9/14/2016

End Date: 9-14-16

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment:

Survey performed to recertify three client home. Home in compliance on day of survey. Corrective Action Report issued with no plan of correction due to CTA by 10/14/16. Home will be recertified for two years for three clients.

Compliance Manager

Primary Care Giver

Date

Date