

Foster Family Home - Corrective Action Report

Provider ID: 1-160068

Home Name: Rubylyn Fiesta, NA

Review ID: 1-160068-1

91-941 Kuhina ST.

Reviewer:

Ewa Beach HI 96706

Begin Date: 10/6/2016

End Date: 10/10/16

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 New Home visit made on 10/06/2016. No corrective action required. Home is eligible for a 1 year 2-bed certification.

Compliance Manager

Rubylyn Fiesta
Primary Care Giver

Date

10/06/2016

Date