

Foster Family Home - Corrective Action Report

Review ID: 1-100045

Home Name: Mydanelle Vila, CNA

Review ID: 1-100045-5

94-454 Hene Street

Reviewer:

Walpahu HI 96797

Begin Date: 10/25/2016

End Date: 10/31/16

Foster Family Home - Required Certificate

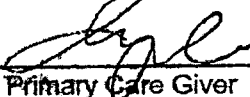
[17-1454/6]

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

Comment:

6.(d)(1) The home visited on 10/25/2016 for a 3-bed CCFFH environmental review. Home is in compliance with all environmental requirements. Move letter given with a move in date of 11/1/16.

Compliance Manager



Primary Care Giver

Date

10/30/16

Date