

Foster Family Home - Corrective Action Report

Provider ID: 1-562878

Home Name: Fe Dumlao, CNA

Review ID: 1-562878-6

91-865 Hamiha Place

Reviewer:

Ewa Beach HI 96706

Begin Date: 12/1/2016

End Date: 12/1/16

Foster Family Home

Required Certificate


[17-1454-6]

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

Comment:

6.(d)(1) Home visit for a 3 person CCFFH recertification review made on 12/1/2016. Home is in compliance with all requirements. Home will receive a 2 year 3 bed certification.

Compliance Manager



Primary Care Giver

Date

12/1/16

Date