

Foster Family Home - Corrective Action Report

Provider ID: 1-628191

Home Name: Maritess Mercado, NA

Review ID: 1-628191-6

94-1085 Awanani Street

Reviewer:

Waipahu HI 96797

Begin Date: 8/15/2016

End Date: 8/15/16

Foster Family Home Required Certificate [17-14546]

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

Comment:

Home visit for a 2 person CCFH recertification review made on 8/15/16. Home is in compliance with all requirements. Home will receive a 2 year 2 bed certification.

Compliance Manager

Maritess O. Mercado

Primary Care Giver

Date

8/15/16

Date