

# Foster Family Home - Corrective Action Report

Provider ID: 1-512451

Home Name: Nikk Rumbaoa, CNA

Review ID: 1-512451-4

91-1511 Maipuhi Street

Reviewer:

Ewa Beach HI 96706

Begin Date: 12/15/2016

End Date: 12/15/16

Foster Family Home Required Certificate

[17-1454-6]

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

Comment:

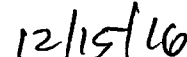
Home visit for a 3 person CCFFH recertification review made on 12/15/16. Home is in compliance with all requirements. Home will receive a 2 year 3 bed certification.

Compliance Manager



Primary Care Giver

Date



Date