

# Foster Family Home - Corrective Action Report

Provider ID: 2-587462

Home Name: Carmen Sanchez, CNA

Review ID: 2-587462-6

45-542 Pikake Street

Reviewer:

Honokaa

HI 96727

Begin Date: 1/18/2017

End Date:

1/23/17

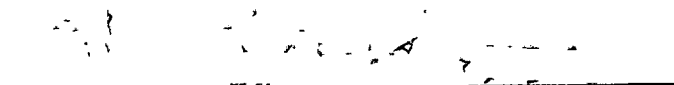
Foster Family Home Required Certificate

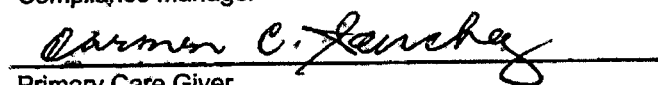
[17-1454-6]

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

Comment:

Home visit survey performed to recertify three client home. Home in compliance on day of survey. Corrective Action Report issued with no plan of correction due. Home is eligible for two year recertification for three clients.

  
Compliance Manager

  
Primary Care Giver

  
Date

  
Date