

# Foster Family Home - Corrective Action Report

Provider ID: 1-120008

Home Name: Elena Fronda, CNA

1684 Hoolana Street

Pearl City

HI 96782

Review ID: 1-120008-6

Reviewer:

Begin Date: 2/9/2017

End Date: 2/9/2017

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment:

6 (d)(1) Requirements at the time of the home visit made on 2/9/2017. No corrective action required. Home is eligible for a 2 year 2-bed certification.

Compliance Manager

*Elena Fronda*

Primary Care Giver

Date

2/9/17

Date