

Foster Family Home - Corrective Action Report

Provider ID: 1-510257

Home Name: Elma Tierra, CNA

Review ID: 1-510257-4

94-877 Mokuahi Street

Reviewer: David Ayling

Waipahu HI 96797

Begin Date: 3/8/2017

End Date: 3/8/17

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 2 person CCFFH recertification review made on 3/8/17. Home is in compliance with all requirements. Home will receive a 2 year 2 bed certification.

Compliance Manager


Primary Care Giver

Date

3/7/17
Date