

# Foster Family Home - Corrective Action Report

Provider ID: 1-589856

Home Name: Jeanne Reutirez, CNA

Review ID: 1-589856-6

94-747 Makou Place

Reviewer: David Ayling

Waipahu HI 96797

Begin Date: 4/18/2017

End Date: 4/18/17

Foster Family Home

Required Certificate

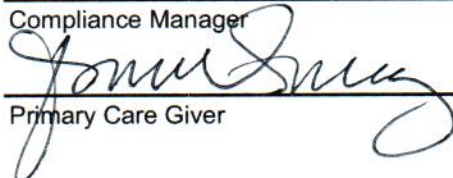
[17-1454-6]

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

Comment:

Home visit for a 3 person CCFFH recertification review made on 4/18/17. Home in compliance with all requirements. Home will receive a 2 year 3 bed certification.

Compliance Manager



Primary Care Giver

Date

4/18/17

Date