

# Foster Family Home - Corrective Action Report

Provider ID: 2-140053

Home Name: Edna Salom, CNA

812 West Kawaiiani Street

Hilo HI 96720

Review ID: 2-140053-5

Reviewer: Carol Copeland

Begin Date: 8/9/2017

End Date: 8/11/2017

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 to CTA. Home is eligible for a two year recertification for three clients.

Carol Copeland  
Compliance Manager

Edna Salom  
Primary Care Giver

8/10/17  
Date

8/10/17  
Date