

Foster Family Home - Corrective Action Report

Provider ID: 1-120042

Home Name: Herbert Sales, NA

94-1112 Lumikula Street

Waipahu

HI 96797

Review ID: 1-120042-6

Reviewer: David Ayling

Begin Date: 11/7/2017

End Date: 11/7/17

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 11/7/17.

6.(d)(1) - did not comply with 43.(c)(5)(A) from unannounced visit on 9/22/17. Home will receive a 1 year 2 bed certification.

David A. Ayling
Compliance Manager

11/7/17
Date

Herbert G. Sales
Primary Care Giver

11/7/17
Date