

Foster Family Home - Corrective Action Report

Provider ID: 1-628133

Home Name: Jesusa Guillermo, CNA

91-870 Haehae Place

Ewa Beach HI 96706

Review ID: 1-628133-4

Reviewer: David Ayling

Begin Date: 11/1/2017

End Date: 11/1/17

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 11/1/17.
Home in compliance with all requirements. Home will receive a 2 year 2 bed certification.


Compliance Manager


Primary Care Giver

11/1/17
Date

11/1/17
Date