Foster Family Home - Corrective Action Report

Provider ID:

1-559205

Home Name:

Maribel Tan, CNA

Review ID:

1-559205-4

94-250 Kipou Street

Reviewer:

Waipahu

HI 96797

Begin Date:

David Ayling 4/3/2018

End Date: 4/3/18

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 4/3/18. 6.(d)(1) - Home in compliance with all requirements. Home will receive a 2 year 3 bed certification.

Compliance Manager

Primary Care Giver

Date

Date

ate