

# Foster Family Home - Corrective Action Report

Provider ID: 1-509945

Home Name: Alma Acasio, CNA

Review ID: 1-509945-5

108 Kaniko Place

Reviewer: David Ayling

Wahiawa

HI 96786

Begin Date: 6/21/2018

End Date: 6/21/18

Foster Family Home

Required Certificate

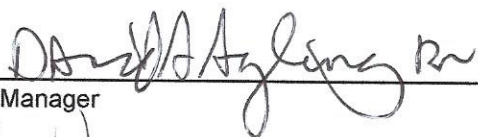
[17-1454-6]

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

Comment:

Home visit for a 3 person CCFFH recertification review made on 6/21/18.

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

  
Compliance Manager

6/21/18  
Date

  
Primary Care Giver

6-21-18  
Date