

Foster Family Home - Corrective Action Report

Provider ID: 2-583254

Home Name: Edna Rice, CNA

15-1707 26th Avenue,
Paradise Drive

Keaau

HI 96749

Review ID: 2-583254-5

Reviewer: Carol Copeland

Begin Date: 8/30/2018

End Date: 9-12-18

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment:

6.(d)(1) Home inspection performed to recertify three client home. Home in compliance on day of inspection. Corrective action report issued with no plan of correction due to CTA.

Carol Copeland RN MSW
Compliance Manager

9-12-18
Date

Edna Rice
Primary Care Giver

9-7-2018
Date