

Foster Family Home - Corrective Action Report

Provider ID: 2-510679

Home Name: Helen Sapla, CNA

88 Pakalana Street

Hilo

HI 96720

Review ID: 2-510679-4

Reviewer: Carol Copeland

Begin Date: 9/11/2018

End Date: 9-17-18

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
Helen Sapla
Helen Sapla
Primary Care Giver

9-11-18
Date

Date