

# Foster Family Home - Corrective Action Report

Provider ID: 1-514936

Home Name: Rosalinda Lopez, RN

92-6001 Puapake Street

Kapolei

HI 96707

Review ID: 1-514936-5

Reviewer: Lori O'Keefe

Begin Date: 11/1/2018

End Date:

11/5/18

Foster Family Home

Required Certificate

[17-1454-6]

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

Comment

Recertification inspection made today. Home is in full compliance and eligible for 3 client recertification.

Lori O'Keefe RN

Compliance Manager

Rosalinda S. Lopez RN

Primary Care Giver

11/1/18

Date

11/1/18

Date