

# Foster Family Home - Corrective Action Report

Provider ID: 2-560062

Home Name: Rufelia Tomas, LPN

45-496 Analio Place

Honokaa

HI 96727

Review ID: 2-560062-4

Reviewer: Carol Copeland

Begin Date: 12/20/2018

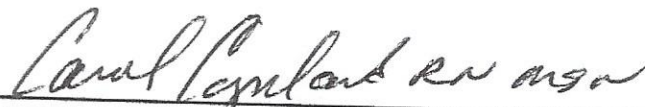
Foster Family Home Required Certificate


[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.

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

12-20-18

Date

12-20-18

Date