

Foster Family Home - Corrective Action Report

Provider ID: 1-563785

Home Name: Melany Raralio, CNA

Review ID: 1-563785-5

92-766 Palailai Street

Reviewer: Lisa Johnson

Kapolei HI 96707

Begin Date: 5/30/2019

Foster Family Home

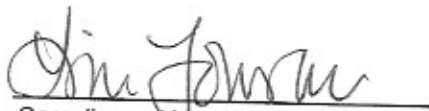
Required Certificate


[11-800-6]

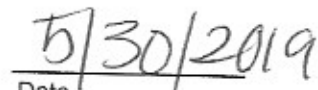
6.(d)(1) Comply with all applicable requirements in this chapter; and

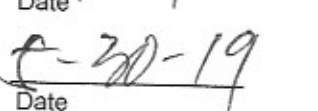
Comment:

6.(d)(1) Home inspection for a 3 person CCFFH recertification made on 5/30/19. Home is in compliance with all requirements.


Compliance Manager


Primary Care Giver


Date


Date