

# Foster Family Home - Corrective Action Report

Provider ID: 1-190060

Home Name: Jess Carino, NA

Review ID: 1-190060-1

5171 Likini Street

Reviewer: David Ayling

Honolulu HI 96818

Begin Date: 7/22/2019

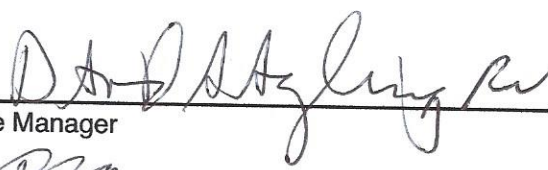
**Foster Family Home**      **Required Certificate**      **[11-800-6]**

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

Comment:

Home inspection for a new 2 person CCFFH certification made on 7/22/19.

6.(d)(1) - Home is in compliance with all requirements. Home will receive a 2 bed certification.

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

7/22/19  
Date

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

7/22/19  
Date