

Foster Family Home - Corrective Action Report

Provider ID: 1-509763

Home Name: Esther Corpuz, CNA

Review ID: 1-509763-6

94-972 Lumiloke Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 1/13/2020

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 3 person CCFFH recertification completed.

Home is in compliance with all requirements. Home will receive a 3 bed certification.

Maribel Nakamine, RN

Compliance Manager

Esther Corpuz

Primary Care Giver

1/13/2020

Date

1/13/2020

Date