

# Foster Family Home - Corrective Action Report

Provider ID: 1-160010

Home Name: Juvy Caslib, LPN

2837 Numana Road

Honolulu

HI 96819

Review ID: 1-160010-4

Reviewer: David Ayling

Begin Date: 1/13/2020

Foster Family Home

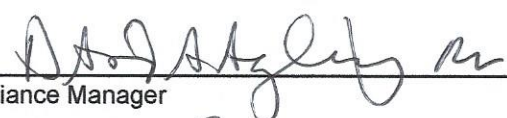
Required Certificate

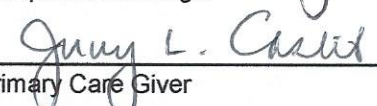
[11-800-6]

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

Comment:

6.(d)(1) - Home inspection for a 2 person CCFFH recertification. PCG requests to increase to a 3 client CCFFH. Home will receive a 3 bed certification.

  
Compliance Manager

  
Primary Care Giver

1/13/20  
Date

1/13/20  
Date