

Foster Family Home - Corrective Action Report

Provider ID: 1-562662

Home Name: Leslie Ann Ballesteros, CNA

Review ID: 1-562662-5

98-131 Kaluamoi Place

Reviewer: Jackie Chamberlain

Pearl City HI 96782

Begin Date: 2/18/2020

Foster Family Home

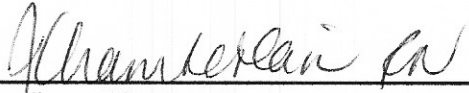
Required Certificate

[11-800-6]

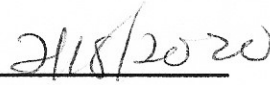
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:


6(d)(1) Home inspection made for a 3 bed recertification. Home met all compliance requirements at the time of the home inspection. No corrective action required



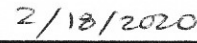
Compliance Manager



Date



Primary Care Giver



Date