

# Foster Family Home - Corrective Action Report

Provider ID: 1-190033

Home Name: Glenn T. Goya, NA

91-1019 Pailani Street

Ewa Beach

HI 96706

Review ID: 1-190033-2

Reviewer: Jackie Chamberlain

Begin Date: 4/16/2020

Foster Family Home

Required Certificate

[11-800-6]

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

Comment:

Recertification inspection conducted for this CCFFH. Home met all compliance requirements as determined during Covid-19 criteria at the time of the home inspection. No corrective action required

Jackie Chamberlain RN  
Compliance Manager

Glenn T. Goya  
Primary Care Giver

4/16/2020  
Date

4/16/2020  
Date