

Foster Family Home - Corrective Action Report

Provider ID: 4-130002

Home Name: Abigail Navalta, RN

Review ID: 4-130002-8

415 Waiehu Beach Road

Reviewer: Lori O'Keefe

Wailuku HI 96793

Begin Date: 2/19/2020

Foster Family Home

Required Certificate

[11-800-6]

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

Comment:

6.d.1 - Recertification inspection for this 3 bed home.
The home is in full compliance with the HAR's and eligible for recertification.

Lori O'Keefe RN

Compliance Manager

Asvian RN

Primary Care Giver

2/19/2020

Date

2/19/2020

Date