

## Foster Family Home - Corrective Action Report

Provider ID: 1-599946

Home Name: Carmenchu Cortez, CNA

94-885 Kaaholo Street

Waipahu

HI 96797

Review ID: 1-599946-7

Reviewer: Pamela Perry

Begin Date: 4/21/2020

Foster Family Home


Required Certificate

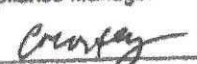
[11-800-6]

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

Comment:

6.(d)(1) Home visit for a 3 person CCFFH recertification made on 4/21/2020. Home in compliance with all requirements. Home will receive a 3 bed certification.

  
\_\_\_\_\_  
Compliance Manager

  
\_\_\_\_\_  
Primary Care Giver

4/21/20  
Date

4/21/20  
Date