

Foster Family Home - Corrective Action Report

Provider ID: 1-170011

Home Name: Jerry Nacion Jr., CNA

99-104 Puakala Street

Aiea HI 96701

Review ID: 1-170011-4

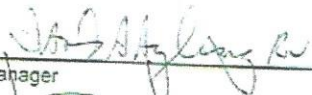
Reviewer: David Ayling

Begin Date: 4/20/2020

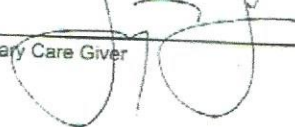
Foster Family Home Required Certificate [11-800-6]

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

6 (d)(1) - Home inspection for a 2 person CCFH recertification.
Home will receive a 2 bed certification.



Compliance Manager



Primary Care Giver

4/21/2020
Date

4/22/2020
Date