

Foster Family Home - Corrective Action Report

Provider ID: 1-561739

Home Name: Lawrence Sabangan, CNA

Review ID: 1-561739-11

91-2035 Pahuhu Place

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 7/30/2020

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 re-certification. No corrective action required

Jackie Chamberlain RN
Compliance Manager

Lawrence Sabangan
Primary Care Giver

7/30/2020
Date

7/30/2020
Date