

Foster Family Home - Corrective Action Report

Provider ID: 1-120013

Home Name: Elena A. Vlloria, CNA

91-1359 Wahane Street

Kapolei HI 96707

Review ID: 1-120013-10

Reviewer: Jackie Chamberlain

Begin Date: 9/16/2020

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 2 bed CCFFH recertification. Home met all compliance requirements at the time of the home inspection. No corrective action required
Increase to 3 bed CCFFH this certification

Jackie Chamberlain
Compliance Manager

Elena A. Vlloria
Primary Care Giver

8/16/2020
Date

8/16/20
Date