

Foster Family Home - Corrective Action Report

Provider ID: 1-090099

Home Name: Judilyn Arruda, CNA

Review ID: 1-090099-7

45-182 Keana Road

Reviewer: Julie Hastings

Kaneohe HI 96744

Begin Date: 5/13/2020

Foster Family Home

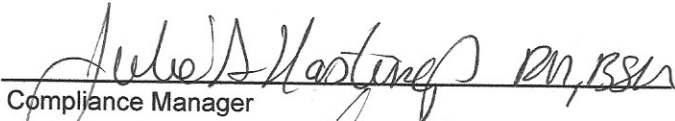
Required Certificate


[11-800-6]

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

Comment:

6.(d)(1)-Annual inspection conducted for this 3 bed home.
Home is in compliance with all reviewed HARS


Compliance Manager


Primary Care Giver

5/13/20
Date

5/13/20
Date