

Foster Family Home - Corrective Action Report

Provider ID: 1-560252

Home Name: Lucia Sibayan, CNA

Review ID: 1-560252-7

91-1175 Hanaloa Street

Reviewer: Jackie Chamberlain

Ewa Beach HI 96706

Begin Date: 5/18/2020

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 CCFFH recertification. Home met all compliance requirements at the time of the home inspection. No corrective action required

Jackie Chamberlain
Compliance Manager

Lucia L. Sibayan
Primary Care Giver

5/18/2020
Date

5/18/2020
Date