

# Foster Family Home - Corrective Action Report

Provider ID: 2-509789

Home Name: Erlinda Mirasol, CNA

Review ID: 2-509789-8

425 Ainaola Drive

Reviewer: Terri Van Houten

Hilo HI 96720

Begin Date: 4/15/2021

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

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

Comment:

6.(d)(1) - Unannounced home inspection for 2 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 5/15/2021.

## Foster Family Home Background Checks [11-800-8]

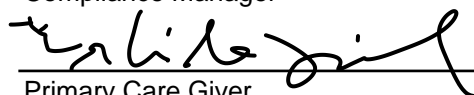
8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1) - CG#2 Lapse in eCrim, due on 1/17/21, completed 3/17/21



Compliance Manager



Primary Care Giver

4/15/21

Date

4/15/21

Date