

# Foster Family Home - Corrective Action Report

Provider ID: 1-140044

Home Name: Maricel Ballares Lutrania, NA

Review ID: 1-140044-8

94-1065 Lumiauu Street

Reviewer: Jackie Chamberlain

Waipahu

HI 96797

Begin Date: 5/26/2021

Foster Family Home

Required Certificate

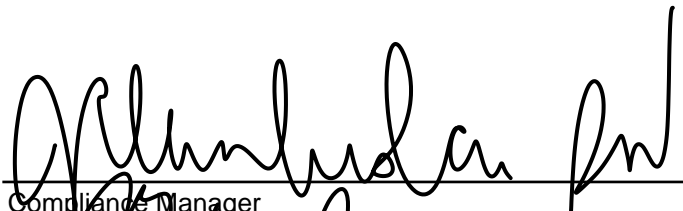
[11-800-6]

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

Comment:

6(d)(1) CCFFH inspection made for a 2 bed re-certification.

No corrective action required.



Compliance Manager



Primary Care Giver

5/26/21  
Date  
5/26/21  
Date