

Foster Family Home - Corrective Action Report

Provider ID: 2-160033

Home Name: Olga Shkredko, CNA

Review ID: 2-160033-6

14-790 Seaview Road

Reviewer: Terri Van Houten

Nanawale HI 96778

Begin Date: 3/24/2021

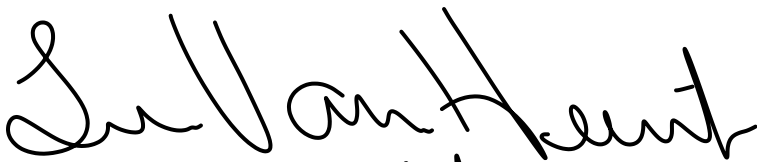
Foster Family Home **Required Certificate** **[11-800-6]**

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

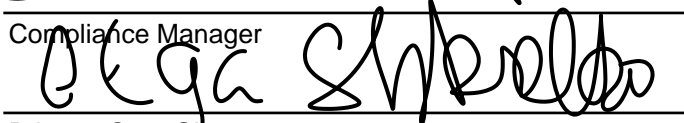
Comment:

6.(d)(1) – Unannounced home inspection made for a 2 bed CCFFH recertification. Home met all compliance requirements at the time of the inspection. No corrective action required.

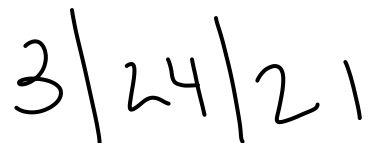
CCFFH does not currently have clients residing in the facility.



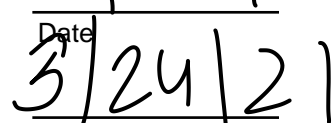
Compliance Manager



Primary Care Giver



Date



Date