

Foster Family Home - Corrective Action Report

Provider ID: 1-588981

Home Name: Pauline Agluba, RN

Review ID: 1-588981-10

94-536 Niulii Street

Reviewer: Maribel Nakamine

Waipahu HI 96797

Begin Date: 4/16/2021

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

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

Comment:

Unannounced recertification inspection for a 3 person CCFFH completed.

Home is in compliance with all requirements. Home will receive a 3 bed certification.

Maribel Nakamine, RN 4/16/2021
Compliance Manager Date

Pauline Agluba 4/16/2021
Primary Care Giver Date