

Foster Family Home - Corrective Action Report

Provider ID: 4-160022

Home Name: Violeta Ulep, CNA

Review ID: 4-160022-2

557 Kaulana Street

Reviewer: Terri Van Houten

Kahului HI 96732

Begin Date: 6/14/2021

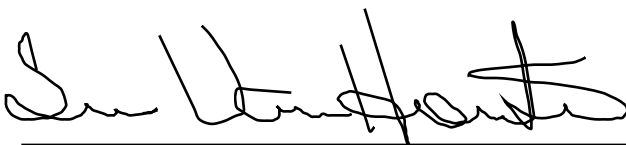
Foster Family Home **Required Certificate** **[11-800-6]**

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

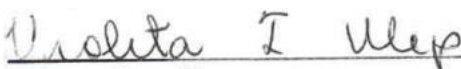
Comment:

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

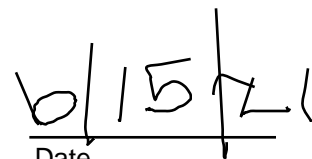
CCFFH currently has one resident under the care of the previous PCG residing at this location. This client is in agreement to remain in the same CCFFH under the care of the new PCG.



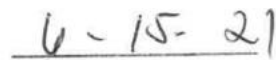
Compliance Manager



Primary Care Giver



Date



Date