

Name of Foster Parents (s): LOPEZ, Katrina Date of Inspection: 1/17/20

**Department of Health
Developmental Disabilities Division
Adult Foster Home Corrective Action Report**

No deficiencies

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
<p>§11-148-34 <u>PERSONAL QUALIFICATIONS REQUIRED:</u></p> <p>(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.</p>	<p>Criminal history clearances pending for caregivers.</p>	<p>Criminal clearances received for all caregivers as of 1/23/20.</p>
<p>(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.</p>	<p>Caregiver to submit CAN/APS clearances ASAP for caregivers and all adult household members.</p>	<p>CAN/APS clearances received for all caregivers and household members as of 2/11/12.</p>