Name of Foster Parents (s): <u>Filonila Soriano</u> Date of Inspection: <u>2/4/20</u>

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

☐ No deficiencies

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	
§11-148-34 <u>PERSONAL</u> <u>QUALIFICATIONS</u> <u>REQUIRED</u> :	Annual Criminal History Clearances pending for Caregivers.	Criminal history clearances completed for all
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.		caregivers as of 12/6/19.
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	CAN/APS Clearance pending for one caregiver.	CAN/APS clearances completed for all caregivers as of 2/27/20.