

Name of Foster Parents (s): Erlinda Juan

Date of Inspection: 4/27/20

**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
§11-148-34 PERSONAL QUALIFICATIONS REQUIRED: (b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	The Certified Caregiver shall obtain an Adult Protective Service (APS) and Child Abuse & Neglect (CAN) clearance for the identified substitute caregiver and submit it to the Certification Unit by 5/27/20.	