

Name of Foster Parents (s): Mataele, Lavinia Date of Inspection: 8/19/20

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
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Effective immediately, caregiver to submit annual criminal history clearance consents along with payment for all required individuals.	
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Effective immediately, caregiver to submit proof of payment for Adult Protective Services (APS) and Child Abuse and Neglect (CAN) clearances. Then upon receipt of results, caregiver to submit clearance results for all required individuals.	

