

Name of Foster Parents (s): Tita Lappay

Date of Inspection: 7/22/20

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

No deficiencies

<b>SECTION</b>	<b>PLAN CORRECTION (To be completed by the caregiver)</b>	<b>Completion Date</b>
§11-148-34 <b>PERSONAL QUALIFICATIONS REQUIRED:</b>  (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 Adult Protective Services (APS) and Child Abuse & Neglect (CAN) clearances for herself and her substitute caregiver and submit the results to the Certification Unit by 8/22/20.	7/22/20