

Name of Foster Parents (s): Visitacion, Sheryl Date of Inspection: 12/17/20

**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>
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Annual criminal history clearance consent forms and payment submitted for all required individuals. Pending results.	12/29/20
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Adult Protective Services and Child Abuse and Neglect registry check results are pending for 4 household members.	1/8/21
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Primary Care Physician did not include order indicating consistency for liquids as part of participant's diet order. Effective immediately, Caregiver to obtain complete diet order and to provide copy to Certification Unit.	1/8/21