Name of Foster Parents (s): Primrose Leong-Nakamoto Date of Inspection: 03/06/20

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 PERSONAL QUALIFICATIONS REQUIRED: (b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care. 	The Department of Health to determine if the Criminal History of the caregiver and substitute caregivers poses a risk to the foster adult in care.	3/17/20
(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 & Neglect (CAN) registry checks for the caregiver and substitute caregivers.	5/15/20