

Name of Foster Parents (s): Navarro, Rosalyn Date of Inspection: 5/27/21

**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
§11-148-16 RECORD: (a) & (b)(1) A current register of all foster adults admitted that includes foster adult's name, birth date, age, reason for placement, date placed, and date removed.	Admission/Discharge Record was updated; however, discharge date for one participant was incorrect. Correction completed on-site on 5/27/21.	5/27/21