Name of Foster Parents (s): Arista, Herminigilda and Benjamin Date of Inspection: _6/16/21_

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)	
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Caregiver submitted annual criminal history clearance consents along with payment for all required individuals. Pending results.	6/25/21