Name of Foster Parents (s): Ofelia Lagat Date of Inspection: 8/26/21

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

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	
§11-148-34 <u>PERSONAL</u> <u>QUALIFICATIONS</u> <u>REQUIRED</u> :	The criminal history record clearances for the certified and substitute caregivers are pending.	
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.		