

Name of Foster Parents(s): Roy & Maybell Dacuycuy Date of Inspection: 10/01/21

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
<p>§11-148-34 <u>PERSONAL QUALIFICATIONS REQUIRED:</u> (b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.</p>	<p>Caregiver submitted annual criminal history consents and payment, results pending.</p>	10/22/21
<p>(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.</p>	<p>Caregiver submitted proof of payment for Adult Protective Services (APS) & Child Protective Services (CPS), caregiver to submit results upon receipt.</p>	10/15/21