

Name of Foster Parents (s): Stephen Mejos

Date of Inspection: 10/21/21

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

No deficiencies

<b>SECTION</b>	<b>PLAN CORRECTION</b> <b>(To be completed by the caregiver)</b>	<b>Completion Date</b>
<p>§11-148-34 <b><u>PERSONAL QUALIFICATIONS REQUIRED:</u></b></p> <p>(a) Foster parents and all members of the household shall show evidence of being well-adjusted persons, capable of accepting, understanding, and caring for foster adults and working with the department.</p>	<p>The Certified caregiver shall submit to the Certification Unit signed consents to obtain local criminal history record clearances for identified household members by 11/04/21.</p>	
<p>§11-148-34 <b><u>PERSONAL QUALIFICATIONS REQUIRED:</u></b></p> <p>(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>The Certified caregiver shall submit to the Certification Unit signed requests for criminal history record clearances and the required processing fees for himself and his substitute caregivers by 11/04/21.</p>	
<p>§11-148-34 <b><u>PERSONAL QUALIFICATIONS REQUIRED:</u></b></p> <p>(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.</p>	<p>The certified caregivers shall obtain and submit to the Certification Unit Adult Protective Services (APS) and Child Abuse &amp; Neglect (CAN) clearances for himself, his substitute caregivers and all adult household members by 11/21/21.</p>	

