Name of Foster Parents (s): _Paz, Eulalia and Noel_ Date of Inspection: __10/7/21

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
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Annual criminal history clearance results are pending for caregivers and substitute caregivers.	10/22/21