Name of Foster Parents (s): Maricel & Richard Hioki Date of Inspection: 3/1/22

## **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)	
§11-148-34 <u>PERSONAL</u> <u>QUALIFICATIONS</u> <u>REQUIRED</u> :	Criminal history consents and payments submitted, pending results for caregiver and substitute caregivers.	
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.		