



**Office of Provider Standards & Review  
Plan of Correction**

<b>Provider / Facility Name: Beacon of Light</b>	<b>Date of Review: 08/05/13</b>
<b>Provider # / Facility #4800979</b>	<b>POC due within 14 days of receipt of Compliance Summary</b>
<b>County of Review: Lucas</b>	

<b>Cites/Technical Assistance</b>	<b>Plan of Correction</b>	<b>Appeals</b>	<b>POC Approved Y/N</b>
Technical Assistance Only: 9.5 Provider did not ensure that staff hired after January 1, 2013 sign an attestation form with all disqualifying offenses listed to ensure that direct services are only provided by employees who do not have a disqualifying offense and who are not included on any of the databases identified in rule. Please see attached form.	N/A	N/A	N/A
Technical Assistance Only: 9.7 Provider did not ensure that staff hired after January 1, 2013 sign a statement with all disqualifying offenses listed attesting that the staff person has never plead guilty to or been convicted of a disqualifying offense. Please see attached form.	N/A	N/A	N/A

<b>Cites/Technical Assistance</b>	<b>Plan of Correction</b>	<b>Appeals</b>	<b>POC Approved Y/N</b>