

Name of Foster Parents (s): Marites Failma

Date of Inspection: 1/22/20

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

No deficiencies

<b>SECTION</b>	<b>PLAN CORRECTION (To be completed by the caregiver)</b>	<b>Completion Date</b>
§11-148-16 <b>RECORD:</b> (b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Effective immediately, the certified caregiver shall have a signed physician's order for all medications and treatments. The certified caregiver shall obtain a signed physician's order for the identified medication and treatment by 2/22/20.	2/14/20
§11-148-22 <b>EMERGENCIES:</b> (a) Foster parent obtained an emergency protocol in the event of sudden illness or accident.	Effective immediately, the certified caregiver shall always have a current emergency protocol in place. The foster parent shall obtain a copy of the identified foster adult's current Individualized Service Plan (ISP) that includes the Risk & Safety and Emergency & Crisis planning sections by 2/22/20.	2/14/20
§11-148-45 <b>REQUIREMENTS:</b> (13) The premises is kept in a sanitary and safe condition with reasonable protection from fire hazards, drugs, poisons, household supplies and dangerous tools, and weapons.	Effective immediately, the certified caregiver shall properly dispose of all medications as they expire. The identified expired medication was disposed of during the AFH inspection on 1/22/20.	2/14/20