Name of Foster Parents (s): <u>PASCUA, Nena</u> Date of Inspection: <u>1/29/20</u>

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
§11-148-16 RECORD : (b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	Caregiver to practice the following expectations prior to administering medications: 1. Review the complete and accurate, signed and dated medication orders. 2. Ensure that the medication label matches the order. 3. Ensure that the Medication Administration Record (MAR) matches the order. 4. If there are discrepancies, Caregiver to call the prescribing physician to clarify. 5. Once it is determined that the medication label and MAR match the order, Caregiver to administer the medication. 6. Once the medication is administered, Caregiver to immediately initial the MAR. Caregiver to attend the Medication Administration training on February 12, 2020 from 9am to 1230pm. Caregiver to call the Case Manager and ResHab Nurse to inform of the medication errors. Caregiver to complete an AER for each of the medication errors and submit it to the ResHab Agency for review and forwarding to the Case Manager. (Certifier will be forwarded copies of the AERs after processed by the CM.) Certifier will conduct an unannounced follow-up visit and request that the ResHab agency retrain caregiver. Substitutes should participate in the retraining. Corrections due: March 2, 2020	All corrections completed 2/12/20

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Caregiver to review medications at every doctor visit and obtain signed orders from the prescribing physician for medications anytime a medication is added, discontinued, or modified. Caregiver to discuss discontinuing medications no longer being used. Caregiver to review signed orders for accuracy prior to leaving the doctor's office. Orders must include medication name, dosage size, frequency, route, and any special instructions.	All Corrections received 3/3/20.
	It is important for the Primary Medical Doctor (PMD) to be aware of all medications. Thus, PMD after-visit summaries should accurately reflect prescribed medications' dosage sizes and instructions. Caregiver to inform PMD of inconsistencies and obtain an after-visit summary that accurately reflects all medications.	
	When medication orders do not match the filled prescription (medication label), Caregiver to immediately call the prescribing doctor to clarify. If orders are confirmed to be accurate, but label is wrong, Caregiver to copy the correct order and attach it to the medication. Caregiver also to attach current orders to over-the-counter (OTC) medications. Caregiver to bring in medications with correct orders attached to the Certification Unit for verification.	
	Caregiver to obtain complete and accurate medication orders signed and dated by each prescribing physician. Caregiver to submit copies of orders to the Certification Unit for verification. Corrections due: March 2, 2020	

Name of Foster Parents (s): <u>PASCUA, Nena</u> Date of Inspection: <u>1/29/20</u>

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
§11-148-34 PERSONAL QUALIFICATIONS REQUIRED:	Caregiver to submit copies of the CAN/APS Clearances for all caregivers and adult household members. Corrections due: March 2, 2020	All CAN/APS Clearances received 3/12/20
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.		