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 : (a) & (b)(1) A current register of all foster adults admitted that includes foster adult's name, birth date, age, reason for placement, date placed, and date removed.	Effective immediately, the certified caregivers shall keep a register of all foster adults admitted to the home. The certified caregivers shall complete an Admission/Discharge Record for the period covering 10/2019 to 7/2020 and submit a copy to the Certification Unit for verification by 8/15/20.	8/03/20

§11-148-16 **RECORD**:

(b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.

Effective immediately, the certified caregivers shall take the following action to minimize the risk of medication errors:

- (a) When preparing the Medication Administration Record (MAR) the certified caregivers shall record the name of the medication, the dosage, the number of capsules/tablets, the number of times per day it is to be given, the specific time the medication is to be given and the route/method by which it is to be given.
- (b) When giving medications, the individual's MAR must be present.
- (c) Before giving a medication, the medication label and the physician's order shall be read and compared with the MAR (The physician's order, the MAR and the label must match).
- (d) Record the administration of the medication immediately on the individual's MAR.
- (e) The certified caregivers shall also follow best practice guidelines by adhering to the "six rights" of medication administration (RIGHT MEDICATION, RIGHT DOSE, RIGHT ROUTE/METHOD, RIGHT TIME, RIGHT PERSON, RIGHT DOCUMENTATION).
- (f) An Adverse Event Report (AER) documenting each medication error shall be completed and submitted to the foster adult's assigned Case Manager. A copy of the AERs shall be submitted to the Certification Unit for verification by 8/15/20.
- (g) The certified caregivers shall be retrained on proper medication administration and documentation from

8/03/20

Date of Inspection: 7/15/20

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date		
	the RES/HAB or T&C-RN provider agency overseeing and delegating the nursing task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 8/15/20.			
§11-148-16 RECORD : (b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Effective immediately, the certified caregivers shall always have a signed physician's order for every medication or treatment, including orders to discontinue a medication or treatment. Physician's orders for medications shall include the name of the medication, the dosage, the number of capsules/tablets, the number of times per day it is to be given and the route/method by which it is to be given. The certified caregivers shall obtain physician's orders for the identified medications by 8/15/20.	8/03/20		
§11-148-16 RECORD : (b)(2)(C)(7) During residence, foster adult record includes recordings of foster adult's weight, on a monthly basis or more often when requested by the physician or DDD.	Effective immediately, the certified caregivers shall record the foster adults' weight on a monthly basis.	8/03/20		

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	
§11-148-16 RECORD : (b)(2)(C)(9) During residence, foster adult record includes incident reports of bodily injury or other unusual circumstances (i.e. suspected abuse/neglect, medication errors and/or unexpected reaction to medication or treatment, change in behavior, change in health condition requiring medical treatment, death, and whereabouts unknown).	Effective immediately, the certified caregivers shall inform the foster adult's case manager verbally within 24 hours or the next business day and in writing within 72 hours in the form of an Adverse Event Report (AER) for any use of restrains, which includes chemical, mechanical or physical restraints. The certified caregivers shall also take the following actions: (a) An AER documenting the use of a chemical restraint shall be completed and submitted to the foster adult's assigned case manager. A copy of the AER shall be submitted to the Certification Unit for verification by 8/15/20. (b) The certified caregivers shall be retrained on the procedures for reporting adverse events involving participants of the Developmental Disabilities Division (DDD) by the RES/HAB provider agency overseeing and delegating the nursing task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 8/15/20.	8/03/20
§11-148-28 RESIDENT'S ACCOUNTS: (d) Record contains a current inventory of possessions.	Effective immediately, the certified caregivers shall maintain a current inventory of the foster adult's possessions. The certified caregivers shall complete an inventory of the identified foster adult's possessions and forward a copy to the Certification Unit for verification by 8/15/20.	8/03/20

Name of Foster Parents (s): <u>Larry & Roxan Manzano</u> Date of Inspection: <u>7/15/20</u>