

Name of Foster Parents(s): Celedonia Tapiz

Date of Inspection: 7/23/20

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)(2) During residence, foster adult record includes observations of the foster adult's response to medication, treatments, diet, plan of care (ISP), changes in condition, indications of illness or injury, and behavior patterns monthly or more often as appropriate.	(1 & 2) The certified caregiver shall obtain a current ISP for 2019 & 2020 and submit it to the certification unit for verification by 8/20/20.	7/24/20
(b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	(3) The certified caregiver shall obtain an MD order with the route and submit it to the certification unit by 8/20/20.	8/20/20
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	(4) The certified caregiver shall submit a MAR with the route and submit it to the certification unit by 8/20/20.	8/20/20
(b)(2)(C)(8) During residence, foster adult record includes notations of visits made to or by the resident.	(5 & 6) Copies of 2019 and 2020 visitation records to be submitted for verification by August 20, 2020.	9/16/20

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SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
<p>§11-148-34 PERSONAL QUALIFICATIONS REQUIRED:</p> <p>(a) Foster parents and all members of the household shall show evidence of being well-adjusted persons, capable of accepting, understanding, and caring for foster adults and working with the department.</p>	<p>The Department of Health to determine if the identified individuals poses a risk to foster adults in care.</p>	<p>7/16/20</p>
<p>(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.</p>	<p>The Department of Health to determine if the criminal history for the caregiver and substitute caregiver poses a risk to the foster adults in care.</p>	<p>7/21/20</p>
<p>(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.</p>	<p>Effective immediately, caregiver to submit proof of payment for Adult Protective Services (APS) and Child Abuse and Neglect (CAN) registry checks for the caregiver, substitute caregiver and household members.</p>	<p>7/21/20</p>
<p>§11-148-37 HEALTH OF FOSTER FAMILY:</p> <p>(b)(2) Tuberculosis (TB) clearance, in accordance with current department recommendations, on every member of the household.</p>	<p>(7) TB clearances for household members to be submitted to the certification unit by 8/20/20.</p>	<p>8/10/20</p>