

Name of Foster Parents (s): Combis, Teresa

Date of Inspection: 9/25/20

**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
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Current diet order not on file. Effective immediately, caregiver to submit current diet order after physical exam is done on 9/26/20.	
§11-148-21 HEALTH: (a) Foster adult had a completed physical examination by a licensed physician upon initial admission and at least annually thereafter.	No current physical exam on file. Exam is scheduled on 9/26/20. Effective immediately, caregiver to submit Physical Exam after completion.	