

Name of Foster Parents (s): Hufana, Teresita

Date of Inspection: 12/30/19

**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>
(b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	This is considered a Medication Error. An Adverse Events Report (AER) needs to be completed & submitted through Res/Hab. agency, keep a copy for your records. And a copy of AER to be submitted to the certification unit for verification by January 30, 2020.	2/13/20
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Copy of updated medication label or updated MD order to be submitted for verification by January 30, 2020.  Since medication has not been administered since ordered in September 2019 copy of discontinuation order or Verification of new medication to be submitted by January 30, 2020.	1/10/20
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Pending	1/13/20
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Pending	1/13/20

