Department of Health

Developmental Disabilities Division

Adult Foster Home Corrective Action Report

No Record Review deficiencies

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
§11-148-16 RECORD : (b)(2)(A) & (B) Foster adult record includes the contact information of the adult's physician, DDD Case Manager and parents, legal guardian or other responsible party in the event of an emergency.	Effective immediately, the certified caregiver shall always have the contact information for the foster adult's case manager in the event of an emergency. The certified caregiver shall fully complete the foster adult's information sheet and forward a copy to the Certification Unit by 4/10/21.	4/09/21
§11-148-16 RECORD : (b)(2)(C)(1) During residence, foster adult record includes copies of physicians' initial, annual, and periodic medical exams, evaluations, progress notes, and lab reports.	Effective immediately, the certified caregiver shall maintain copies of the foster adults' medical examinations, evaluations, and progress notes. The certified caregiver shall obtain copies of medical examinations completed within the past year by 4/10/21.	4/09/21
§11-148-16 RECORD : (b)(2)(C)(1) During residence, foster adult record includes reports of annual tuberculosis clearances.	Effective immediately, the certified caregiver shall obtain a valid TB clearance for each foster adult upon admission into the foster adult. The certified caregiver shall obtain TB clearances for each foster adult by 4/10/21.	5/13/21

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	
§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 caregiver shall take the following action to minimize the risk of medication errors:	4/01/21
	(a) When preparing the Medication Administration Record (MAR), the name of the medication, dosage, number to capsules/tablets or amount of liquid, 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 shall be recorded.	
	(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 caregiver 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 <u>each</u> 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 4/10/21.	
	(g) The certified caregiver shall be retrained on proper medication administration and documentation from the Registered Nurse providing Training & Consultation Services and delegating the nursing task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 4/10/21.	

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	-
§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 caregiver shall always have a signed physician's order for every medication or treatment and diet. The certified caregiver shall obtain signed physician's order for the identified medications and diet by 4/10/21.	4/09/21
§11-148-21 HEALTH: (a) Foster adult had a completed physical examination by a licensed physician upon initial admission and at least annually thereafter.	Effective immediately, the certified caregiver shall ensure foster adults complete a physical examination upon admission and at least annually thereafter. The certified caregiver shall assist the identified foster adult with obtaining a physical examination and to forward a copy of the examination to the Certification Unit as verification by 4/10/21.	4/09/21
§11-148-21 HEALTH: (e)Foster parent carried out regularly planned medical visits.	Effective immediately, the certified caregiver shall maintain copies of the foster adults' medical examinations, evaluations, and progress notes. The certified caregiver shall obtain copies of medical examinations completed within the past year by 4/10/21.	4/09/21
§11-148-22 EMERGENCIES : (a) Foster parent obtained an emergency protocol in the event of sudden illness or accident.	Effective immediately, the certified caregiver shall always have a current emergency protocol in place. The foster parent shall obtain a copy of the foster adults' current Individualized Service Plan (ISP) that includes the Risk & Safety and Emergency & Crisis planning sections by 4/10/21.	4/09/21
§11-148-34 PERSONAL QUALIFICATIONS REQUIRED: (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.	The certified caregiver shall submit to the Certification Unit a signed consent to obtain a State of Hawaii criminal history record clearance for the identified person by 4/10/21.	5/18/21

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	
§11-148-34 <u>PERSONAL</u> <u>QUALIFICATIONS</u> <u>REQUIRED</u> :	State & Federal criminal history record clearances for the certified caregiver and substitute caregiver are pending.	3/16/21
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.		
§11-148-34 <u>PERSONAL</u> <u>QUALIFICATIONS</u> <u>REQUIRED</u> :	The certified caregiver shall submit to the Certification Unit APS) and Child Abuse & Neglect (CAN) clearances for the identified person by 4/10/21.	4/22/21
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.		
§11-148-37 HEALTH OF FOSTER FAMILY: (b)(2) Tuberculosis (TB) clearance, in accordance with current department recommendations, on every member of the household.	The certified caregiver shall submit to the Certification Unit a TB clearance for the identified person by 4/10/21.	4/14/21