

Name of Foster Parents (s): Walter Espiritu

Date of Inspection: 2/02/21

**Department of Health**  
**Developmental Disabilities Division**  
**Adult Foster Home Corrective Action Report**

No deficiencies

<b>SECTION</b>	<b>PLAN CORRECTION</b> <b>(To be completed by the caregiver)</b>	<b>Completion Date</b>
§11-148-16 <b>RECORD:</b> (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: (a) The certified caregiver shall review the physician's progress notes or after visit instructions at the conclusion of a medical examination. The certified caregiver shall never be afraid to ask questions, as it could save both the individual and the individual's caregivers from serious consequence. (b) 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. (c) When giving medications, the individual's MAR must be present. (d) 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). (e) Record the administration of the medication immediately on the individual's MAR.	3/11/21

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SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
	<p>(f) 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).</p> <p>(g) 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 3/02/21.</p> <p>(h) The certified caregiver and his substitute caregiver shall be retrained on proper medication administration and documentation from the Registered Nurse providing Training &amp; Consultation Services and delegating the nursing task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 3/02/21.</p>	
<p>§11-148-16 <b>RECORD:</b> (b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.</p>	<p>Effective immediately, the certified caregiver shall always have a signed physician's order for every medication or treatment. The certified caregiver shall obtain a signed physician's order for the change in dosage of identified medication by 3/02/21.</p>	<p>3/01/21</p>

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<b>SECTION</b>	<b>PLAN CORRECTION (To be completed by the caregiver)</b>	<b>Completion Date</b>
<p>§11-148-16 <b>RECORD:</b> (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).</p>	<p>Effective immediately, the certified caregiver shall report occurrences of adverse events on the AER form and in accordance with timelines specified in Developmental Disabilities Division (DDD) policy. An AER 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 3/02/21.</p>	<p>2/04/21</p>
<p>§11-148-21 <b>HEALTH:</b> (a) Foster adult had a completed physical examination by a licensed physician upon initial admission and at least annually thereafter.</p>	<p>Effective immediately, foster adults shall have an annual physical examination by a licensed physician. The certified caregiver shall ensure the identified foster adult has an annual physical examination by 3/02/21.</p>	<p>3/01/21</p>
<p>§11-148-34 <b>PERSONAL QUALIFICATIONS REQUIRED:</b> (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 State &amp; Federal criminal history record clearances for the certified caregiver and substitute caregiver are pending.</p>	<p>2/08/21</p>

