

Name of Foster Parents (s): Mary Elaine Ferrer & Dante Bonoan Date of Inspection: 4/22/21

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)(1) During residence, foster adult record includes reports of annual tuberculosis clearances.	Effective immediacy, the foster adults' records shall include TB clearances. The certified caregivers shall obtain TB clearance for both foster adults and file them in their current record by 5/22/21.	4/25/21
§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 caregivers shall always have a signed physician's order for every medication to treatment. The certified caregivers shall obtain signed physician's order for the identified medications by 5/22/21.	7/26/21

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SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
<p>§11-148-16 <u>RECORD:</u> (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 caregivers shall inform the foster adult's case manager verbally within 24 hours or the next business day and in writing within 72 hours in the form of an Adverse Event Report (AER) for any use of restrains, which includes chemical, mechanical or physical restraints. The certified caregivers shall also take the following actions:</p> <p>(a) An AER documenting the most recent use of a chemical restraint 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 5/22/21.</p> <p>(b) The certified caregivers shall be retrained on the procedures for reporting adverse events involving participants of the Developmental Disabilities Division (DDD) by the RES/HAB provider agency overseeing and delegating the nursing task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 5/22/21.</p>	<p>6/15/21</p>
<p>§11-148-34 <u>PERSONAL QUALIFICATIONS REQUIRED:</u> (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 & Federal criminal history record clearances for the certified caregivers and substitute caregiver are pending.</p>	<p>4/27/21</p>

