

Name of Foster Parents (s): Arturo and Naty Mendoza Date of Inspection: 4/19/21

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
(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. Caregiver to obtain diet order from primary care physician and submit verification to Certification by 5/19/21.	
§11-148-21 HEALTH: (a) Foster adult had a completed physical examination by a licensed physician upon initial admission and at least annually thereafter.	Self Preservation statement was not updated by primary care physician. Caregiver to obtain self preservation statement from PCP and to submit copy to Certification Unit for verification by 5/19/21.	
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Caregiver submitted annual criminal history consents and payment. Pending results	
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Adult Protective Services (APS) and Child Abuse and Neglect (CAN) results still pending for all required individuals. Caregiver to submit APS/CAN results immediately upon receipt for all required individuals.	