Name of Foster Parents (s): <u>Joselito PANGANIBAN</u> Date of Inspection: <u>1/5/21</u>

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

□ No deficiencies

SECTION	PLAN CORRECTION (To be completed by the correction)	Completion Date
§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.	Caregiver to ensure that all documentation needed to secure appropriate medical treatment for his participants are in place AND caregiver to request support from Case Manager as needed. Caregiver also to ensure that all necessary doctors are in place and that initial and follow up visits are completed. If there are challenges (as suggested by caregiver) with securing medical insurance and medical appointments with after visit summaries, then caregiver to clearly	2/9/21
	document this in his notes. Caregiver to also document all attempts to remedy these challenges, including attempts to contact case manager/service supervisor for assistance. Correction due: February 15, 2021	
(b)(2)(C)(1) During residence, foster adult record includes reports of annual tuberculosis clearances.	Caregiver to obtain TB clearances for both participants and submit to the Certification Unit for verification. Correction due: February 15, 2021	2/9/21
(b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	Caregiver to review orders and ensure that both medication label and MAR (Medication Administration Record) match the order. Caregiver to clarify with MD whether 20mg or 40mg should be administered.	2/9/21

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
	Caregiver to document medication administration as well "treatment" (such as ordered food supplement) on MAR.	
	Caregiver to always include the time that a medication is administered. When a medication is administered as a PRN, CG can record the time of administration below his/her initial.	
	Caregiver to submit January & February MAR to the Certification Unit for verification.	
	Corrections/Verifications due: February 15, 2021	
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Caregiver to ensure that complete medication orders are signed and dated by the prescribing physician and are at least one year current. For orders to be complete, they must indicate name, dosage size, frequency, route, and any special instructions. Additionally, PRN medication orders must indicate the reason for administration.	2/9/21
	Caregiver to obtain complete and accurate signed and dated medication orders every time a medication is increased, decreased, started, or stopped. Caregiver to update the Medication Administration Record (MAR) anytime changes to the order are made.	
	Caregiver to submit complete and accurate orders to the Certification Unit for verification.	

SECTION	PLAN CORRECTION (To be completed by the caregiver) Caregiver to obtain a Diet order and submit to the Certification Unit for verification. Corrections/Verifications due: February 15, 2021	Completion Date
(b)(2)(C)(7) During residence, foster adult record includes recordings of foster adult's weight, on a monthly basis or more often when requested by the physician or DDD.	Caregiver to indicate day, month, and year that weight is taken. If CG is unable to take weight due to behavior, CG to document this in CG notes; all dates attempts made should also be documented. Caregiver to submit the weight log for January and February OR submit documentation indicating that the weight was unable to be taken and the reason why. Corrections/Verifications due: February 15, 2021	2/9/21
§11-148-21 HEALTH: (a) Foster adult had a completed physical examination by a licensed physician upon initial admission and at least annually thereafter.	Caregiver to complete an annual Physical Examination for participant and submit a copy to the Certification Unit for verification. This physical should include a self-preservation statement. Corrections/Verifications due: February 15, 2021	2/9/21

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	Date
(e) Foster parent carried out regularly planned medical visits.	Caregiver to secure a psychiatrist for participant and document attempts in caregiver notes.	2/16/21
	Caregiver to submit an after visit summary of visit with psychiatrist for verification.	
	Regular dental check ups are part of regularly planned medical visits.	
	Caregiver to submit an after-visit summary with dentist for verification.	
	Caregiver to submit verification of visit with Primary Care Physician (PCP)	
	Corrections/Verifications due: February 15, 2021	
§11-148-22 EMERGENCIES: (a) Foster parent obtained an emergency protocol in the event of sudden	Caregiver to be familiar with the emergency protocols outlined in the ISP. When attending the ISP meeting, Caregiver to request that the Emergency and Crisis Planning section be updated.	2/16/21
illness or accident.	Caregiver to obtain a copy of the ISP and keep in participant's chart. Caregiver to submit a copy of the Emergency and Crisis Planning page to the Certification Unit for verification.	
	Corrections/Verifications due: February 15, 2021	
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	CAN/APS clearances pending for caregiver and substitute caregiver.	4/26/21