

Name of Foster Parents(s): Melanie & Randy Peralta Date of Inspection: 9/10/20

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)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	(1) The certified caregiver to submit an MD order with the route to the Certification Unit by October 8, 2020.	9/28/20
§11-148-21 HEALTH: (a) Foster adult had a completed physical examination by a licensed physician upon initial admission and at least annually thereafter.	(2) The certified caregiver to submit a copy of the current PE to the Certification Unit by 10/8/20.	9/28/20
§11-1422 EMERGENCIES: (a) Foster parent obtained an emergency protocol in the event of sudden illness or accident.	(3 & 4) The certified caregiver to submit self-preservation statements to the Certification Unit by 10/8/20.	9/28/20
§11-148-23 DIET: Foster parent provides an adequate diet for good nutrition.	(5) The certified caregiver to submit a diet order to the Certification Unit by 10/8/20.	9/28/20

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SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
§11-148-34 <u>PERSONAL QUALIFICATIONS REQUIRED:</u> (b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Effective immediately caregiver to submit proof of payment for Adult Protective Services (APS) and Child Abuse & Neglect (CAN) registry checks for all caregivers and substitute caregivers.	11/18/20