

Name of Foster Parents (s): Shelli Lynn Souza-Motta

Date of Inspection: 8/04/21

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

No deficiencies

<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)(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 diet, medications, and treatments. The certified caregiver shall obtain signed physician's orders for diet and the identified medications by 9/04/21.</p>	9/27/21
<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, the certified caregiver shall ensure foster adults complete a physical examination upon initial admission and at least annually thereafter. The certified caregiver shall obtain a physical examination for the identified foster adult by 9/04/21.</p>	9/21/21
<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 results of the criminal history record clearances for the certified caregiver and substitute caregiver are pending.</p>	9/03/21