

Name of Foster Parents (s): Rigonan, Teresita

Date of Inspection: 8/31/21

**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>                      (a) &amp; (b)(1) A current register of all foster adults admitted that includes foster adult's name, birth date, age, reason for placement, date placed, and date removed.</p>	<p>Admission/Discharge form was not updated. Caregiver updated register of all foster adults admitted and discharged from adult foster home. Correction accepted on-site.</p>	8/31/21
<p>(b)(2)(C)(1) During residence, foster adult record includes reports of annual tuberculosis clearances.</p>	<p>No current TB clearance on file for one participant. TB test is scheduled on 9/7/21. Caregiver to submit copy of TB clearance by 10/1/21.</p>	9/23/21
<p>(b)(2)(C)(2) During residence, foster adult record includes observations of the foster adult's response to medication, treatments, diet, plan of care (ISP), changes in condition, indications of illness or injury, and behavior patterns monthly or more often as appropriate.</p>	<p>Current ISP not on file. Caregiver to request and obtain copy of current ISP. Caregiver to submit 1<sup>st</sup> page of ISP as verification of receipt by 10/1/21.</p>	9/23/21
<p>(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>Caregiver submitted annual criminal history clearance consents along with payment for all caregiver and substitute caregivers. Results are pending.</p>	9/21/21

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<b>SECTION</b>	<b>PLAN CORRECTION (To be completed by the caregiver)</b>	<b>Completion Date</b>
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	APS/CAN clearance results are pending for all required individuals.	9/23/21