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

☐ No deficiencies

SECTION	PLAN CORRECTION	Completion Date
	(To be completed by the caregiver)	
§11-148-16 RECORD: (b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	(1) Caregiver to submit an MD order with the route and submit to the Certification Unit by 1/14/22.	2/4/22
	(2) Caregiver to submit a MD order to discontinue medications and submit to the Certification Unit by 1/14/22.	2/4/22
	(3,4,5,6) Effective immediately, the certified caregiver shall take the following action to minimize the risk of medication errors:	
	(a) When giving medications, the individual's Medication Administration record (MAR) and a monthly calendar with the correct day of the month must be present for accuracy.	
	(b) Record the administration of the medication immediately on the individual's MAR on the specific day of the month. Caregiver will verify the date that the medication is being administered.	
	(c) The certified caregiver shall also follow best practice guidelines by adhering to the "six rights" of medication administration (RIGHT MEDICATION, RIGHT DOSE, RIGHT ROUTE/METHOD, RIGHT TIME, RIGHT PERSON, RIGHT DOCUMENTATION).	

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	(To be completed by the caregiver)	
	(d) An Adverse Event Report (AER) documenting the medication error shall be completed and submitted to the foster adult's assigned Case Manager.	
	(e) The certified caregiver shall be retrained on proper medication administration and documentation from the Registered Nurse overseeing Residential Habilitation Services and delegating the nurse task of administering medications. Verification of such retraining shall be submitted to the Certification Unit by 1/14/22.	2/11/22 & 2/17/22
	A copy of the AER shall be submitted to the Certification Unit for verification by	
	<u>1/14/22.</u>	
§11-148-22 EMERGENCIES: (a) Foster parent obtained an emergency protocol in the event of sudden illness or accident.	(7) Caregiver to submit the self-preservation statements signed by the PCP. Submit to the Certification Unit by 1/14/22.	1/4/22
§11-148-34 <u>PERSONAL</u> <u>QUALIFICATIONS REQUIRED</u> : (b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Criminal History request and payments were submitted, results pending.	12/28/21
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Caregiver to submit copies of the APS/CAN Clearances for the caregiver and substitute caregivers.	2/14/22