

Name of Foster Parents (s): Daquip, Vincent and Elizabeth Date of Inspection: 12/1/21

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
(b)(2)(A) & (B) Foster adult record includes the contact information of the adult's physician, DDD Case Manager and parents, legal guardian or other responsible party in the event of an emergency.	Contact Information form not updated. Caregiver to update case manager information for both participants charts. Caregiver to submit copies of updated Contact Information forms by 1/3/22.	1/6/22
(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.	Current ISP not on file for both participants. Caregiver to obtain and review most current ISP for both participants. Caregiver to file ISP in respective participants' charts and to submit 1 st page of ISPs to Certification by 1/3/22.	1/6/22
(b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	PRN medications for both participants were not listed on Medication Administration Record monthly. Advised caregiver to list PRN medications on MAR even though it has not been given for that month effective immediately.	1/6/22

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SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Current order for one medication not on file. Caregiver to clarify with PCP and to submit physician's order or verification to Certification by 1/3/22. Current physician's orders not on file for several medications for one participant. Caregiver to obtain orders from physician and submit it to Certification by 1/3/22.	1/6/22
(e) Foster parent carried out regularly planned medical visits.	Effective immediately, caregiver to document vital signs as instructed by primary care physician on log. Caregiver to submit copy of monthly vital signs log to Certification by 1/3/22.	1/6/22
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Caregiver to submit annual criminal history clearances along with payment for required individuals effective immediately	12/14/21
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Caregiver to submit Adult Protective Services (APS) and Child Abuse and Neglect (CAN) clearances for all required individuals immediately upon receipt.	1/6/22