Name of Foster Parents (s): <u>ALLAS, Susie</u> Date of Inspection: <u>1/06/22</u>

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 : (a) & (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.	A current register of foster adults admitted into the adult foster home was not on file. Caregiver to complete Admission/Discharge Form and submit it to Certification Unit by 2/7/22.	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 copy of ISP not on file. Caregiver to request and obtain current copy of ISP from case manager. Caregiver to submit 1 st page of ISP as verification to Certification Unit by 2/7/22.	2/1/22
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Discontinue order not on file for one medication. Caregiver to obtain D/C order and submit by 2/7/22.	2/1/22
(b)(1) Criminal history record for foster parents and substitute caregiver(s) does not pose a risk to the foster adult(s) in care.	Annual criminal history clearance results pending for caregiver and substitute caregivers.	12/21/21

Name of Foster Parents (s): <u>ALLAS, Susie</u> Date of Inspection: <u>1/06/22</u>

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Adult Protective Services (APS) and Child Abuse and Neglect (CAN) clearance results pending for all required individuals.	2/1/22