

Name of Foster Parents (s): Leano, Heidi and Levy Date of Inspection: 1/11/22

**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>
(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 is not on file for one participant. Caregiver to request copy of ISP and to submit copy of 1 <sup>st</sup> page of ISP to Certification as verification of receipt by 2/11/22.	1/19/22
(b)(2)(C)(5) During residence, foster adult record includes physician's signed orders for diet, medications and treatment.	Current diet order not on file for one participant. Caregiver to obtain and submit diet order by 2/11/22.	1/19/22
(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 caregivers and substitute caregiver.	1/27/22
(b)(4) Background information for foster parents and substitute caregivers does not contain a history of child abuse or neglect.	Adult Protective Services and Child Abuse and Neglect (CAN) for all required individuals are pending. Caregiver to submit results immediately upon receipt.	1/28/22