

Name of Foster Parents(s): Virginia De Guzman

Date of Inspection: 01/14/22

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
§11-148-16 RECORD: (b)(2)(C)(4) & (6) During residence, foster adult record includes medications administered as ordered by physicians.	Caregiver to submit an MD order with the route for the medications to the Certification Unit for verification by 2/11/22.	1/31/22
§11-148-34 PERSONAL QUALIFICATIONS REQUIRED: (a) Foster parents and all members of the household shall show evidence of being well-adjusted persons, capable of accepting, understanding, and caring for foster adults and working with the department.	Manual consent clearance results are pending for all required individuals.	1/25/22
(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 submitted annual criminal history consents and payments, pending results.	1/21/22