IDAHO DEPARTMENT OF
HEALTH & WELFARE

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November 2, 2007

Administrator, Sondra McMindes
Children's Therapy Place
890 N. Cole Road Ste A
Boise Idaho 83704

Dear Ms. McMindes,

Thank you for submitting the Plan of Correction for Children' Therapy Place on 11/2/2007 Survey and Certification has reviewed and accepted the Plan of Correction in response to the Department's Compliance Review findings. As a result, we have issued Children's Therapy Place., a full two (2) year certificate effective from November 2, 2007 through October 31, 2009

According to IDAPA 16.04.11.203.01, this certificate is contingent upon the correction of deficiencies. Your agency will be required to submit documentation to substantiate that you your Plan of Correction has been met. Documentation must be submitted within 7 days from the date of completion listed on your agency's plan of correction and no later than December 10, 2007. You may submit supporting documentation as follows:

Fax to: 364-1811,
Email to: fadnessr@dhw.idaho.gov
Mail to: PO Box 83720, Boise Idaho 83720
Or deliver to: 3232 Elder Street, Boise Idaho 83705

You can reach me if you have any questions at 208-364-1906.

Thank you for your patience and accommodation through the survey process

Rebecca Fadness
Program Supervisor
DDA Survey and Certification

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DDA COMPLIANCE REVIEW

AGENCY NAME: CHILDREN'S THERAPY PLACE **SURVEY DATE(S):** SEPTEMBER 25, 2007 – SEPTEMBER 27, 2007

NOTE: This document contains a listing of findings made by the survey team. The summary of survey findings is based on the survey team's professional knowledge and interpretation of IDAPA requirements. In the Column, "Agency's Plan for Compliance", the statement should reflect the agency's plan for compliance action and anticipated time for plan to be implemented.

SURVEY TEAM MEMBERS: Rebecca Fadness, Program Supervisor
Cyndy Jonsson, Clinician
Linda Keirnes, M. Ed.
Veronica Martinez, MSW

SURVEY FINDINGS

Consumer/Family Satisfaction Survey:
Parent satisfaction surveys were very positive. Both of the participants parents/guardians stated feeling extremely satisfied with the services received by the agency, and especially with the developmental therapists. Communication was also excellent between agency and parents/guardians. Staff is available for questions and clarifications as needed and requested.

Therapy Observation Notes:
The participants and therapists appeared to have a good and positive relationship. Both of the participants were engaged and focused in the therapy session. The therapist worked on the objectives identified in the PIP and seemed to follow the instructions and the reinforcements suggested in the plan. Both of the participants were successful in completing the tasks and activities presented by the therapist. Therapist actively used language and encouraged and model appropriate usage. Therapist for participant #2 referred back to her note book and gathered data during the transition activity.

Deficiencies:	Agency's Plan for Compliance:
IDAPA 16.04.11.400.GENERAL STAFFING REQUIREMENTS FOR AGENCIES. 02. Professionals. The agency must have available, at a minimum, the following personnel, qualified in accordance with Section 420 of these rules, as employees of the agency or through formal written agreement: (7-1-06) **FINDINGS:** Based upon record review and interview with administrator, the agency is not in compliance. The findings included :	**This deficiency was corrected September 28th, 2007. A written contract was developed for the Physical Therapist and signed by both the Physical Therapist and the agency administrator.** **In the future, a written contract will be in place prior to any services provided for any contractors. The program manager will ensure that a contract is in place prior to any services provided.**

• Agency does not have a written contract for Physical Therapist	
IDAPA 16.04.11.009.MANDATORY CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS. 01. Verification of Compliance. The agency must verify that all employees, subcontractors, agents of the agency, and volunteers delivering DDA services to participants with developmental disabilities have complied with IDAPA 16.05.06, "Rules Governing Mandatory Criminal History Checks." (7-1-06) **FINDINGS:** Based upon record review and interview with administrator, the agency is not in compliance. The findings included : • Agency did not have documentation that verification of criminal history check occurred for Psychologist.	**Though a criminal history check had been requested of the psychologist, one was not provided. A copy of the psychologists criminal history background check was obtained by the Developmental Specialist on 11.1.07 and placed in the HR file.** **The program manager will ensure that any psychologists utilized in the future provide documentation of a completed criminal history check prior to providing services.**
IDAPA 16.04.11.605. REQUIREMENTS FOR SPECIFIC SKILL ASSESSMENTS.04. Determine a Participant's Skill Level. Be conducted for the purposes of determining a participant's skill level within a specific domain. (7-1-06) **FINDINGS:** Based upon record review, the agency is not in compliance. The findings included • For participant #1, on IPP the baseline and objective criteria percentages (%) do not match those specified on the PIP	**All Participant IPP and PIPs have been reviewed by the Developmental Specialist. The PIPs for participant #1 will be modified by the Developmental Specialist by December 1, 2007 to accurately reflect the criteria percentages listed on the IPP. A copy of the accurate PIPs will be provided to the Developmental Therapist by the Developmental Specialist by December 1, 2007.** **For all new participants, the Developmental Specialist will perform a QA on each participant's file prior to services being provided to ensure compliance.**
IDAPA 16.04.11.701. 05. Individual Program Plan (IPP). For participants three (3) through seventeen (17) years of age who do not use ISSH Waiver services, and for adults receiving EPDST services, the DDA is required to complete an IPP. (7-1-06) e. The IPP must promote self-sufficiency, the participant's choice in program objectives and activities, encourage the participant's participation and inclusion in the community, and contain objectives that are age-appropriate. The IPP must include: (7-1-06) iv. The type, amount, frequency and duration of therapy to be provided. For developmental therapy, the total hours of services provided cannot exceed the amount recommended on the plan. The amount and frequency of the type of therapy must not deviate from the IPP more than twenty percent (20%) over a period of a four (4) weeks, unless there is documentation of a participant-based reason; (7-1-06)	**IPP addendums will be completed by the Developmental Specialist for all agency participants by December 1, 2007 to specify a single amount of therapy recommended, as opposed to a range as is currently stated. Training will be provided by the Developmental Specialist to all Developmental Therapists by December 1, 2007 in regards to amounts of therapy recommended and amounts of therapy provided. In the future, the Developmental Specialist will ensure, on a monthly basis, that therapy provided does not deviate more than 20% from the amount recommended without a participant-based reason.**

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FINDINGS: Based upon record review, the agency is not in compliance. The findings included: • In the two files reviewed, the amount and frequency of the therapy provided was not concurrent with the amount of therapy specified on IPP The amount of therapy billed per week averaged at a higher deviation rate than the twenty percent 20% specified.	
16.04.11.701.05.e Individual Program Plan (IPP). vii. A list of measurable behaviorally stated objectives, which correspond to the list of priority needs. A Program Implementation Plan must be developed for each objective; (7-1-06) **FINDINGS:** Based upon record review, the agency is not in compliance. The findings included: • In the two files reviewed, the percentage (%) stated in the objective criteria was above 25% of the baseline percentage, resulting in difficulty measuring the progress and success of the participants.	**Participant #1 and #2 IPPs have been reviewed. The objective percentages will be modified by the Developmental Specialist by December 1, 2007 to ensure that they are within 25% of the baseline percentages. For all new participants, the Developmental Specialist will perform a QA on each participant's file prior to services being provided to ensure compliance.**

Survey report completed by : Rebecca Fadness, Survey and Certification Program Supervisor Date: 10/12/2007

Agency Administrator Signature: Linda McMinder Date: 11/2/07

Plan of correction accepted: Rebecca Fadness Date: 11/2/07

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