



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies - Recertification

Agency:	All Seasons Mental Health	Region(s):	3 & 4
Agency Type:	Developmental Disabilities Agency	Survey Dates:	5/5/15-5/8/15
Certificate(s) Renewed:	3ALLHORIZ104 4ALLHORIZ088 DDA-616	Certificate(s) Granted:	<input type="checkbox"/> 6 - Month Provisional <input type="checkbox"/> 1 - Year Full <input checked="" type="checkbox"/> 3 - Year Full

Rule Reference/Text	Findings	Agency's Plan of Correction (Please refer to the Statement of Deficiencies cover letter for guidance)	Date to be Corrected (mm/dd/yyyy)
16.03.21.115. CHANGES EACH DDA IS REQUIRED TO REPORT. 01. Change of Ownership or Physical Location. (7-1-11) a. The DDA must notify the Department at least thirty (30) days prior to any anticipated change in ownership or physical location. In order to continue operation after any such anticipated change, the DDA must receive an updated certificate from the Department that reflects the change. An agency that fails to notify the Department of such changes is operating without a certificate. (7-1-11)	A review of agency records determined that the agency failed to notify the Department at least thirty (30) days prior to a change in physical location. Documentation reflects that the agency moved physical locations on 1/1/2015; however the agency did not notify the Department until 2/11/2015.	1. <i>Duties of notifying the Department of changes will be added to administrative staff job description and to company policy and procedure.</i> 2. <i>Administrative job duties will be reviewed to ensure completion in a timely manner. Job duties may be reassigned if necessary.</i> 3. <i>Administrator</i> 4. <i>Job duties will be reviewed annually and upon hire of new administrative staff.</i>	6/30/2015
16.03.21.115. CHANGES EACH DDA IS REQUIRED TO REPORT. 01. Change of Ownership or Physical	Review of agency records revealed that the agency failed to notify the Department of a change in physical location thirty (30) days	1. <i>Duties of requesting a site review from the Department will be added to administrative staff job description and</i>	6/30/2015



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<p>Location. (7-1-11) b. When an agency plans to provide center-based services in a new physical location, on a temporary or permanent basis, the Department will conduct a site review within thirty (30) days after the agency has relocated. Included with the notification required under Subsection 115.01.a. of this rule, the agency must provide: (7-1-11)</p>	<p>prior to the anticipated move. As a result, the Department was unable to conduct a site review within thirty (30) days after the agency relocated.</p> <p>Documentation reflects that the agency moved physical locations on 1/1/2015; however the agency did not notify the Department until 2/11/2015.</p>	<p><i>to company policy and procedure.</i> 2. <i>Administrative job duties will be reviewed to ensure completion in a timely manner. Job duties may be reassigned if necessary.</i> 3. <i>Administrator</i> 4. <i>Job duties will be reviewed annually and upon hire of new administrative staff.</i></p>	
<p>16.03.21.410.01.b 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must: b. Be certified in CPR and first aid within ninety (90) days of hire and maintain current certification thereafter; and (7-1-11)</p>	<p>Review of agency documentation revealed that 1 out of 8 employees was not certified in CPR/First Aid within ninety (90) days of hire; In addition, 1 out of 8 employees failed to maintain current CPR and First Aid certification.</p> <p>For Example:</p> <p>Records for employee #4 revealed that the employee was hired 6/9/2014 but was not certified in CPR/First Aid until 9/19/2014.</p> <p>Records for employee #7 revealed that the employee had a gap in CPR/First Aid</p>	<p>1. <i>Monitoring of CPR/First Aid certification has been assigned to HR. Employees will be reminded to monitor their own certification, will be notified in advance of expiration dates, and will not be eligible to work if certification lapses.</i> 2. <i>All employee files have been reviewed for compliance. No expired certifications were identified. (Employees with expired certifications will not be eligible to work until corrected.)</i> 3. <i>Program Manager and HR.</i> 4. <i>Employee files are monitored and go through a regularly scheduled QA process.</i></p>	<p>6/1/2015</p>



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	certification from 2/16/2013-3/22/2013.		
<p>16.03.21.500.03.a. 500.FACILITY STANDARDS FOR AGENCIES PROVIDING CENTER-BASED SERVICES. The requirements in Section 500 of this rule, apply when an agency is providing center-based services.</p> <p>03. Fire and Safety Standards. a. Buildings on the premises must meet all local and state codes concerning fire and life safety that are applicable to a DDA. The owner or operator of a DDA must have the center inspected at least annually by the local fire authority and as required by local city or county ordinances. In the absence of a local fire authority, such inspections must be obtained from the Idaho State Fire Marshall's office. A copy of the inspection must be made available to the Department upon request and must include documentation of any necessary corrective action taken on violations cited; (7-1-11)</p>	<p>Review of agency documentation revealed that the agency failed to have the center inspected annually by the local fire authority, as required by local city or county ordinances.</p> <p>The agency lacked documentation of the 2013 annual fire inspection for their Rifleman Location which was a center location at that time.</p>	<p><i>1. Duty of scheduling an annual fire inspection has been added to administrative staff job description and to company policy and procedure.</i></p> <p><i>2. Administrative job duties will be reviewed to ensure completion in a timely manner. Job duties may be reassigned if necessary.</i></p> <p><i>3. Administrator</i></p> <p><i>4. Job duties will be reviewed annually and upon hire of new administrative staff.</i></p>	6/1/2015
<p>16.03.21.501.02. 501. VEHICLE SAFETY REQUIREMENTS. Each DDA that transports participants must:</p>	<p>Review of agency documentation revealed that the agency have failed to implement their transportation safety policy.</p>	<p><i>1. Transportation safety policy for the agency has been revised to meet Department and agency standards.</i></p>	6/1/2015



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02. Transportation Safety Policy. Develop and implement a written transportation safety policy. (7-1-11)	As an example, the transportation safety policy states that staff will have a current Idaho Driver's License upon hire. Records for staff #4 revealed a current Washington Driver's License.	<p>2. All staff files have been reviewed for compliance with new transportation safety policy. All files are compliant. (If invalid documents, including Driver's Licenses, are found the employee will be ineligible to work until corrected.)</p> <p>3. HR</p> <p>4. Employee files are monitored and go through a regularly scheduled QA process.</p>	
16.03.21.510.01.c. 510. HEALTH REQUIREMENTS. 01. Required Health Policies and Procedures. Each DDA must develop policies and procedures that: c. Address any special medical or health care needs of particular participants being served by the agency. (7-1-11)	A review of agency documentation revealed that the agency lack a policy and procedure that addresses any special medical or health care needs of particular participants being served the agency.	<p>1. A policy and procedure for special medical or health care needs of participants will be added.</p> <p>2. All participant files will be reviewed for compliance with new policy and adjustments to participant plans will be made if necessary.</p> <p>3. Program Manager and DD Supervisors.</p> <p>4. This policy will be updated as needed and reviewed annually during the annual policy and procedure review.</p>	6/30/2015
16.03.21.601.01.d. 601. Each DDA certified under these rules must maintain accurate, current, and	Review of agency documentation revealed that 3 out of 4 participant profile sheets (Participant 1, A & B) failed to reflect current	1. Current medications based on the most recent medical reports received will be added to participant profile sheets.	7/15/2015



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<p>complete participant and administrative records. These records must be maintained for at least five (5) years. Each participant record must support the individual's choices, interests, and needs that result in the type and amount of each service provided. Each participant record must clearly document the date, time, duration, and type of service, and include the signature of the individual providing the service, for each service provided. Each signature must be accompanied both by credentials and the date signed. Each agency must have an integrated participant records system to provide past and current information and to safeguard participant confidentiality under these rules.</p> <p>01. General Records Requirements. Each participant record must contain the following information:</p> <p>d. Profile sheet containing the identifying information reflecting the current status of the participant, including residence and living arrangement, contact information, emergency contacts, physician, current</p>	<p>medications that the participant is taking.</p>	<p>2. All participant files will be reviewed to ensure current medications are maintained on the profile sheet. Those with incorrect information will be corrected.</p> <p>3. Program Manager and Supervisors</p> <p>4. Upon receipt of medical documentation, participant database will be reviewed to reflect current medications. Medications will also be reviewed during quarterly QA process.</p>	



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<p>medications, allergies, special dietary or medical needs, and any other information required to provide safe and effective care; (7-1-11)</p>			
<p>16.03.21.601.01.e. 601. Each DDA certified under these rules must maintain accurate, current, and complete participant and administrative records. These records must be maintained for at least five (5) years. Each participant record must support the individual's choices, interests, and needs that result in the type and amount of each service provided. Each participant record must clearly document the date, time, duration, and type of service, and include the signature of the individual providing the service, for each service provided. Each signature must be accompanied both by credentials and the date signed. Each agency must have an integrated participant records system to provide past and current information and to safeguard participant confidentiality under these rules. 01. General Records Requirements. Each</p>	<p>Review of agency documentation revealed that 2 out of 4 participant records reviewed (participant's 1 & 2) lacked documentation of a Medical, Social and Developmental assessment reflecting the current status of the participant.</p> <p>Corrected during survey.</p>	<p>1. <i>Corrected during survey.</i> 2. <i>All participant files will be reviewed to ensure current Medical, Social and Developmental assessments are maintained in the file. Those without a current assessment will be requested from TSC.</i> 3. <i>Program Manager and Supervisors</i> 4. <i>During quarterly QA process Medical, Social and Developmental assessments will be checked and requested if not currently in file.</i></p>	<p>7/15/2015</p>



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participant record must contain the following information: e. Medical, social, and developmental information and assessments that reflect the current status of the participant; and (7-1-11)			

Agency Representative & Title: Brian Hulet, DDA Program Manager <i>* By entering my name and title, I agree to implement this plan of correction as stated above.</i>	Date Submitted: 6/3/2015
Department Representative & Title: Kerrie Ann Hull, LMSW <i>* By entering my name and title, I approve of this plan of correction as it is written on the date identified.</i>	Date Approved: 6/4/2015