



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies - Recertification

Agency:	Aspire Human Services LLC-Idaho Falls	Region(s):	VII
Agency Type:	Res Hab	Survey Dates:	06/02/15
Certificate(s) Renewed:	RHA-4076	Certificate(s) Granted:	<input type="checkbox"/> 6 - Month Provisional <input type="checkbox"/> 1 - Year Full <input checked="" type="checkbox"/> 3 - Year Full (09/01/15-08/31/18)

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)
16.04.17.301.03.i PERSONNEL. 03. Personnel Records. A record for each employee must be maintained from date of hire for not less than one (1) year after the employee is no longer employed by the agency, and must include at least the following: i. Evidence of current CPR and First Aid certifications; and (7-1-95)	One of four Employee record review lacked document of current CPR and First Aid certification. For example: Employee 3's record lacks documentation of CPR from 04/21/14-present and no documentation of First AID.	<ol style="list-style-type: none"> 1. Prior to accepting and working with participants, each staff will be required to complete an approved CPR/FA course. Certification needs to be maintained and current at all times or staff will be removed from working with participants immediately until a new certification is completed. 2. An audit will be conducted by the trainer and HRC by 7/31/15 to ensure that all staff are current and in compliance. 3. Trainer, Program Supervisor, and Program Manager at each location 4. Quarterly peer reviews will be conducted by the HRC and a monthly review of training requirements and 	7/31/2015



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		<i>expectations will be completed by the Program Supervisor, Trainer and Program Manager. This will be implemented by 7/1/15.</i>	
<p>16.04.17.301.03.j PERSONNEL. 03. Personnel Records. A record for each employee must be maintained from date of hire for not less than one (1) year after the employee is no longer employed by the agency, and must include at least the following: j. Verification of satisfactory completion of criminal history checks in accordance with IDAPA 16.05.06, "Criminal History and Background Checks"; and (3-20-04)</p>	<p>Four of 14 employee record review lacked documentation the employee satisfactorily completed a criminal history check.</p> <p>For example: Employee 7's criminal history check was for SL Start, not Aspire. Employee 11's date of hire was 09/08/14; the self-declaration application was not signed or notarized and was not fingerprinted until 10/21/14. The background check was not completed per rule requirements. The employee was out of compliance for approximately 43 days. Employee 12's date of hire was 05/01/13; the self-declaration application was not signed and notarized and was not fingerprinted until 05/31/13. The background check was not completed per rule requirements. The employee was out of compliance for approximately 30 days.</p>	<p><i>1. Each employee will obtain CHU fingerprinting within 21 days of completing a signed and notarized application or obtain an ISP transfer request within 30 days of hire. A CHU and ISP background tracking spreadsheet will be implemented, trained and maintained by all HRC's to track each employee through compliance. If an employee misses the scheduled appointment they will be removed from the schedule until such time a new appointment can be obtained. Aspire Human Services will comply will CHU IDAPA rules.</i></p> <p><i>2. An audit will be conducted on all CHU applications and ISP transfer requests by the HRC by 7/31/15.</i></p> <p><i>3. The HRC at the branch location will be responsible for monitoring this on a monthly basis.</i></p>	<p>7/31/2015</p>



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	<p>Employee 13's record includes a clearance from 02/24/12 for another agency. The employee's start date was not until 05/27/14. There is a blank self-declaration application. The criminal history check was added to the agency on 06/10/14, but no documentation of a local Idaho State Police background check. This employee has been out of compliance from 05/27/14 to present.</p>	<p>4. <i>This will be implemented by 7/1/15</i></p>	
<p>16.04.17.302.03. 302. SERVICE PROVISION PROCEDURES. 03. Periodic Review. Review of services and participant satisfaction must be conducted at <u>least quarterly</u> or more often if required by the participant's condition or program. (3-20-04)</p>	<p>Two of two participant record review lacked documentation periodic reviews were conducted.</p> <p>For example: Participant 2 and 3's record only contained quarterly satisfaction done 1st quarter 2015. No documentation the agency conducted quarterly review of participant satisfaction and review of services.</p> <p>Repeat Deficiency from survey conducted 07/17/12.</p>	<p>1. <i>A process will be created at each location in which the QIDP will meet face to face with each participant on a quarterly basis to measure their satisfaction with the program. Each QIDP will fill out a satisfaction survey with the participant and track accordingly.</i></p> <p>2. <i>A review will be conducted to evaluate which participants were missed and a schedule will be created on a quarterly basis going forward that will reflect needed follow up.</i></p> <p>3. <i>QIDP at each branch location</i></p> <p>4. <i>Each QIDP will utilize a tracking spreadsheet that will be accessible to the</i></p>	<p>7/1/2015</p>



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		<i>Program Manager and have it updated by the 15th of the month after the quarter ends for review. This will be implemented starting 3rd quarter of 2015</i>	

Agency Representative & Title: Steve Young, City Director <i>* By entering my name and title, I agree to implement this plan of correction as stated above.</i>	Date Submitted: 6/26/2015
Department Representative & Title: Pam Loveland-Schmidt <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: 6/26/2015