



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies - Recertification

Agency:	TDA, Inc	Region(s):	3
Agency Type:	Residential Habilitation Agency	Survey Dates:	4/28/15-5/18/15
Certificate(s) Renewed:	RHA-311	Certificate(s) Granted:	<input checked="" type="checkbox"/> 6 - Month Provisional <input type="checkbox"/> 1 - Year Full <input 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)
16.04.17.101.04 101. CERTIFICATION - ISSUANCE OF CERTIFICATES. 04. Expiration of Certificate. An agency must request renewal of its certificate no less than ninety (90) days before the expiration of the certificate to ensure there is no lapse in certification. After initial certification the Department may issue a certificate that is in effect for up to three (3) years based upon an agency's substantial compliance with this chapter of rules. (3-29-12)	The agency did not request renewal of its certificate less than ninety (90) days before the expiration date of their certificate.	1. What corrective action(s) will be taken? Agency will request renewal of its certificate more than ninety (90) days before the expiration of its certificate. Agency will implement a policy stating agency will request renewal of its certificate more than one hundred and twenty (120) before the expiration of its certificate. 2. How will the agency identify participants who may be affected by the deficiency(s)? Agency will review deficiency and list of participants. Agency will determine if deficiency affects participants. Based on deficiency, one participant is affected. If participants are identified, what corrective action will be taken? Because one participant is affected agency will implement policy to ensure agency will request renewal	<i>6/15/2015</i>



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		<p>of its certificate more than one hundred and twenty (120) before the expiration of its certificate.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator will be responsible for implementing each corrective action.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Agency administrator will add an annual review date of IDAPA RULES to best monitor rule changes and make corrections as necessary to agency policies and procedures. The agency administrator will add deficiencies to the monitoring tool that reflects the time specificity of the deficiency and similar deficiencies.</p>	
<p>16.04.17.201.03.c. 201. ADMINISTRATION. 03. Responsibilities. The governing authority must assume responsibility for: c. Providing a continuing and annual program of overall agency evaluation; (3-29-12)</p>	<p>Review of agency documentation revealed that the agency lacked documentation verifying that the administrator has completed continuing and annual program of overall agency evaluation.</p>	<p><i>I.</i> What corrective action(s) will be taken? The agency will create the necessary forms and procedures to ensure that documentation verifying that the administrator has completed continuing and annual program of overall agency evaluation and it is completed as specified in IDAPA 16.04.17.</p>	<p><i>7/1/2015</i></p>



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		<p>2. How will the agency identify participants who may be affected by the deficiency(s)? Poorly trained staff affects all our participants. If participants are identified, what corrective action will be taken? The agency will create the necessary forms and procedures to ensure that documentation verifying that the administrator has completed continuing and annual program of overall agency evaluation and it is completed as specified in IDAPA 16. 04.17. Constant monitoring and review of deficiencies eliminates possibility deficiencies reoccurrence.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Administrator will add to the agency policies and procedures annual review signature page that an overall agency evaluation also completed.</p>	



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<p>16.04.17.201.03.d. 201. ADMINISTRATION. 03. Responsibilities. The governing authority must assume responsibility for: d. Assuring that appropriate training, space requirements, support services, and equipment for residential habilitation agency staff are provided to carry out assigned responsibilities; and (3-29-12)</p>	<p>Review of agency documentation revealed that the agency administrator failed to ensure that appropriate training for residential habilitation agency staff has been provided to ensure staff can carry out their assigned responsibilities.</p> <p>For Example:</p> <p>Agency documentation revealed photocopies of CPR and First Aid certifications dated August 2012-2014 and August 2014-2016 for staff #1, 2 and 3. Per reports received from Medic First Aid International, Inc., the CPR Instructor's status expired in February 2011. Certifications provided by the agency are invalid.</p> <p>In addition, the agency has failed to ensure that appropriate training has been provided by a QIDP. Documentation revealed that staff #3 received skill training from the agency administrator and an individual not</p>	<p>1. What corrective action(s) will be taken? All staff will obtain CPR and First Aid certification from American Red Cross and Stevens-Henagar College. Administrator will ensure that all skill training will be done by a QID.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? Agency has identified that all participants require staff who have current CPR/First Aid and who obtain skill training from qualified instructors. If participants are identified, what corrective action will be taken? All staff will receive CPR and First Aid certification from American Red Cross and Stevens-Henagar College. All staff will receive QIDP skill training.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Administrator will add corrections to quality assurance forms and</p>	<p><i>7/1/2015</i></p>



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	<p>identified as an agency staff member. Per verbal report from the agency administrator, both individuals do not qualify as a QIDP therefore do not meet requirements to provide skill training components.</p>	<p>review forms as part of continuous and annual overall agency evaluation.</p>	
<p>16.04.17.202.03.a 202. ADMINISTRATOR. 03. Responsibilities. The administrator, or his designee, must assume responsibility for: a. Developing and implementing written administrative policies and procedures which comply with applicable rules; (3-29-12)</p>	<p>Review of agency documentation revealed that the agency administrator has failed to develop and implement written administrative policies and procedures which comply with applicable rules.</p> <p>For Example:</p> <p>The administrator has failed to develop and implement a medication policy and procedure; the agency staff does assist the participant with medications.</p>	<p>1. What corrective action(s) will be taken? Agency will develop and implement written Administration Medication Handling policy and procedure which comply with IDAPA 23.01.01, "Rules of the Board of Nursing." 2. How will the agency identify participants who may be affected by the deficiency(s)? Agency serves one participant and that one participant has been identified as affected by the deficiency. If participants are identified, what corrective action will be taken? Agency will develop and implement written Administration Medication Handling policy and procedure which comply with IDAPA 23.01.01, "Rules of the Board of Nursing." Staff will be trained in Medication Handling policy and training will be documented 3. Who will be responsible for implementing each corrective action? The</p>	<p>7/1/2015</p>



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		administrator. 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Administrator will add Medication Handling to agency policies and procedures and review as part of continuous and annual overall agency evaluation. Quarterly administrator home visits will include review of medication handling.	
16.04.17.202.03.b. 202. ADMINISTRATOR. 03. Responsibilities. The administrator, or his designee, must assume responsibility for: b. Developing and implementing policies and procedures for agency staff and provider training, quality assurance, evaluation, and supervision; (3-29-12)	Review of agency documentation revealed that agency administrator has failed to implement the policy and procedures for agency staff and provider training, quality assurance, evaluation, and supervision. As an example, the agency has a policy related to the evaluation of staff performance stating that staff evaluations will be completed every six months. The agency administrator was unable to provide verification that staff performance evaluations have been completed since their previous survey conducted in May 2012. The agency has failed to implement the policy	1. What corrective action(s) will be taken? Agency administrator will complete evaluations for all staff within thirty (30) days of plan of correction submission to bring them all current. Evaluations will continue on an annual basis as stated in the revised agency policies and procedures. 2. How will the agency identify participants who may be affected by the deficiency(s)? No participant was directly affected by this deficiency. If participants are identified, what corrective action will be taken? 3. Who will be responsible for implementing each corrective action? The administrator. 4. How will the corrective action(s) be	<i>7/1/2015</i>



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	related to staff evaluation.	monitored to ensure consistent compliance with IDAPA Rules? Administrator will review employee files at least quarterly and document staff needing performance reviews and do those reviews within the required time frame.	
<p>16.04.17.202.03. D. 202. ADMINISTRATOR. 03. Responsibilities. The administrator, or his designee, must assume responsibility for: d. Maintaining adequate financial accounting records according to government accepted accounting principles; (3-29-12)</p>	<p>Review of agency documentation revealed that the agency administrator has failed to maintain adequate financial accounting records according to government accepted accounting principles.</p> <p>For example:</p> <p>When asked the agency Administrator was unable to provide verification of pay stubs or related tax information for staff #2.</p>	<p>1. What corrective action(s) will be taken? Agency added staff #2 as a paid employee to the firm's financial accounting program.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? After careful review of deficiency and programmatic needs of agency participant it was determined that participant was not affected by cited deficiency.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator will be responsible for implementing each corrective action.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Staff #2 will receive pay stubs with all required tax information when</p>	<p>6/1/2015</p>



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		services are rendered. Staff will be instructed to report when pay stub does not accompany pay.	
<p>16.04.17.202.03.e. 202. ADMINISTRATOR. 03. Responsibilities. The administrator, or his designee, must assume responsibility for: e. Making all records available to the Department for review or audit;</p>	<p>After review of agency documentation it was determined that the agency administrator failed to make all records available to the Department for review or audit.</p> <p>Example 1: The agency administrator reports acting as Representative-Payee for participant #1. When asked to provide documentation related to such, the administrator was only able to produce an annual benefit summary printed from the Department of Social Security Administration on the day of survey 4/30/15.</p> <p>Example 2: When asked to provide a copy of current driver's license for staff #2 per the agency's personnel policy and procedure, the agency administrator was unable to do so. The agency administrator was also unable to provide documentation for staff</p>	<p>1. What corrective action(s) will be taken? Administrator will request documentation from the Social Security Administration that she is indeed the participant's payee. The administration has requested a driver's license for staff #2. The Administration will have the required tax documents including pay stubs for staff #2 by correction date. Administrator has received a copy of assistance with medication certification. Administrator will conduct quarterly employee/client records review to ensure that previously possessed documents are still within the records.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? All deficiencies affect licensure and therefore affect all participants. If participants are identified, what corrective action will be taken? Agency will ensure that corrective actions listed in reply #1 are</p>	<p>7/1/2015</p>



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	<p>#2 pertaining to paystubs, tax information or current contact information.</p> <p>Example 3: When asked to provide documentation verifying that staff #3 had completed assistance with medication certification, the agency administrator was unable to do so. As a result the survey team was able to provide the administrator with a copy of the certification obtained from previous survey completed in 2012.</p>	<p>completed.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The administrator will address this rule through annual program evaluation.</p>	
<p>16.04.17.203. 203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING. Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706. Training is to be a part of the orientation training and is required initially prior to accepting participants. All required training must be completed within six (6) months of employment with a residential habilitation agency and documented in the employee residential habilitation provider record. The</p>	<p>Review of agency documentation revealed non-compliance with training requirements as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706.</p> <p>Per IDAPA 16.03.10.705.01.b. All skill training for agency direct service staff must be provided by a Qualified Intellectual Disabilities Professional (QIDP) who has demonstrated experience in writing skill training programs. (3-29-12).</p> <p>As an example, documentation and verbal</p>	<p>1. What corrective action(s) will be taken? Administrator will ensure that all skill training will be done by a QIDP and staff will receive appropriate training to ensure each can carry out his/her assigned responsibilities. 2. How will the agency identify participants who may be affected by the deficiency(s)? All deficiencies affect licensure and therefore affect all participants. If participants are identified, what corrective action will be taken? Agency will ensure that all skill training will be done by a QIDP and staff will receive appropriate training to ensure each can</p>	<p>7/1/2015</p>



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agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12)	report from agency administrator revealed that staff#3 received skill training from the agency administrator and an individual not identified as an agency staff; both of whom do not qualify as a QIDP.	carry out his/her assigned responsibilities. 3. Who will be responsible for implementing each corrective action? The administrator. 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The administrator will address this rule through annual program evaluation.	
16.04.17.300. 300. POLICY AND PROCEDURE MANUAL. A policy and procedure manual must be developed by the residential habilitation agency for effectively implementing its objectives. It must be approved by the governing authority. Policies and procedures must be reviewed annually and revised as necessary. The manual must, at a minimum, include policies and procedures reflecting the following: (3-20-04)	Review of agency documentation revealed that the agency failed to review the policies and procedures annually and revise as necessary. A review was completed in April 2015 prior to survey; however the agency was unable to verify that an annual review had been completed for 2014 and 2013. Repeat Deficiency from 2012 Survey.	1. What corrective action(s) will be taken? Administrator will review agency policies and procedures annually during annual program evaluation. 2. How will the agency identify participants who may be affected by the deficiency(s)? No participant was affected by agency not reviewing its policies and procedures annually. 3. Who will be responsible for implementing each corrective action? The administrator. 4. How will the corrective action(s) be monitored to ensure consistent compliance	6/1/2015



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		with IDAPA Rules? Annual program evaluation including review and updating policies and procedures will address this rule.	
<p>16.04.17.300.08. 300. POLICY AND PROCEDURE MANUAL. A policy and procedure manual must be developed by the residential habilitation agency for effectively implementing its objectives. It must be approved by the governing authority. Policies and procedures must be reviewed annually and revised as necessary. The manual must, at a minimum, include policies and procedures reflecting the following: 08. Personnel. Personnel qualifications, responsibilities, and job description. (7-1-95)</p>	<p>Review of agency documentation revealed that the agency failed to follow its own policy and procedures related to personnel.</p> <p>For Example:</p> <p>The agency policy and procedure related to personnel states that employee records will contain current driver's license, assistance with medication certification and employees will have six month performance evaluations.</p> <p>Records for staff #2 revealed that staff's driver's license had expired in 2006; the agency was unable to provide a copy of the current driver's license when asked.</p> <p>Records for staff #3 lacked verification of assistance with medication certification.</p>	<p><i>1. What corrective action(s) will be taken? Administrator will review employee files to ensure that driver's licenses, assistance with medication, and performance evaluations are current.</i></p> <p><i>2. How will the agency identify participants who may be affected by the deficiency(s)? All participants may be adversely affected by ill-trained or unqualified staff. If participants are identified, what corrective action will be taken? Administrator will obtain current driver's license, medication assistance certification, and complete evaluations for all staff within thirty (30) days of plan of correction submission.</i></p> <p><i>3. Who will be responsible for implementing each corrective action? The administrator.</i></p> <p><i>4. How will the corrective action(s) be</i></p>	<p>7/1/2015</p>



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	Records for staff #2 and #3 lacked documentation of any staff performance evaluations having been completed.	<i>monitored to ensure consistent compliance with IDAPA Rules?</i> The administrator will address this rule through quarterly employee file reviews and annual program evaluation.	
16.04.17.301.01. 301. PERSONNEL. 01. Policies. The agency is responsible for the recruitment, hiring, training, supervision, scheduling, and payroll for its employees, subcontractors or agents. Written personnel policies must be on file and provided to employees who describe the employee's rights, responsibilities, and agency's expectations.	Review of agency documentation has revealed that the agency failed to assume responsibility for the recruitment, hiring, training, supervision, scheduling, and payroll for its employees, subcontractors or agents. When asked, the agency administrator was unable to provide any payroll or scheduling information for staff #2.	1. What corrective action(s) will be taken? Agency added staff #2 as a paid employee to the firm's financial accounting program. Staff schedule will be completed weekly. 2. How will the agency identify participants who may be affected by the deficiency(s)? After careful review of deficiency and programmatic needs of agency participant it was determined that participant was not affected by cited deficiency payroll but was affected by deficiency scheduling. 3. Who will be responsible for implementing each corrective action? The administrator. 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Staff #2 will receive pay stubs with all required tax information when services are rendered.	7/1/2015



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<p>16.04.17.301.02. 301. PERSONNEL. 02. Work Schedules. Coverage is scheduled to assure compliance with the Individual Support and Implementation Plans and all work schedules must be kept in writing. The agency must specify provisions and procedures to assure back-up coverage for those work schedules. (3-20-04)</p>	<p>Through review of agency documentation it has been determined that the agency has failed to ensure that coverage is scheduled to assure compliance with the Individual Support and Implementation Plans and lacks provisions and procedures to assure back-up coverage for those work schedules.</p> <p>As an example, the agency has one staff working with one participant 24 hours per day, 7 days per week. The agency administrator was unable to provide verification of staff back up coverage or how another staff can be utilized.</p>	<p>1. What corrective action(s) will be taken? Administrator will hire an additional staff to assume back-up coverage.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? Administrator identified one participant as being affected by deficiency by evaluation of work schedule. If participants are identified, what corrective action will be taken? Agency will hire an additional staff to assume back-up coverage.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Administrator will ensure that back-up coverage works each week. Administrator will add to policies and procedures a provision that requires back-up coverage to be available and used so that staff will not work with one participant 24/7 for the entire week.</p>	<p>7/15/2015</p>
<p>16.04.17.301.03.a 301. PERSONNEL.</p>	<p>Review of agency documentation revealed that 1 out 3 employee records reviewed</p>	<p>1. What corrective action(s) will be taken? Agency will obtain current addresses for all</p>	<p>6/1/2015</p>



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<p>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:</p> <p>a. Name, current address and phone number of the employee; and (7-1-95)</p>	<p>lacked information related to current address.</p> <p>For Example: Records for staff #2 revealed more than one address, neither of which was current. The agency administrator reports that the staff moved; however the record was not updated to reflect current address.</p>	<p>employees and continue to monitor as part of agency quality assurance.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? No participant is affected. If participants are identified, what corrective action will be taken?</p> <p>3. Who will be responsible for implementing each corrective action? The administrator will be responsible for implementing each corrective action.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? An employee address is one variable in an employee's record. Employee records list all required documentation and will be more closely monitored during agency's continuous quality assurance.</p>	
<p>16.04.17.301.03.i 301. 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</p>	<p>After review of agency documentation, it has been determined that 3 out of 3 staff lack evidence of current CPR and First Aid Certifications.</p>	<p>1. What corrective action(s) will be taken? All staff will obtain CPR and First Aid certification from American Red Cross and Stevens-Henagar College.</p> <p>2. How will the agency identify participants</p>	<p>7/1/2015</p>



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<p>employee is no longer employed by the agency, and must include at least the following:</p> <p>i. Evidence of current CPR and First Aid certifications; and (7-1-95)</p>	<p>Agency documentation revealed photocopies of CPR and First Aid certifications dated August 2012-2014 and August 2014-2016 for staff #1, 2 and 3. Per reports received from Medic First Aid International, Inc., the CPR Instructor's status expired in February 2011. The CPR and First Aid certifications provided by the agency during the time of review are invalid.</p>	<p>who may be affected by the deficiency(s)? Agency has identified that all participants, as well as all staff, may, at some time, require CPR and/or First Aid assistance.</p> <p>If participants are identified, what corrective action will be taken? All staff will receive CPR and First Aid certification from American Red Cross and Stevens-Henagar College. Each staff will obtain ongoing CPR and First Aid certification prior to the expiration date of their current CPR and First Aid certification. Staff will receive appropriate training to ensure each can carry out his/her assigned responsibilities.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator.</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? All deficiencies identified during the current licensure certification will be listed in the agency Program Monitoring Handbook and reviewed as often as the quality assurance for employee required documentation form is reviewed. Each review will be documented as to</p>	



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<p>16.04.17.302.04. 302.SERVICE PROVISION PROCEDURES. 04. Medication Standards. The agency must maintain a policy describing the program's system for handling participant medications which is in compliance with the IDAPA 23.01.01, "Rules of the Board of Nursing." (3-20-04)</p>	<p>Review of agency documentation revealed that the agency lacks documentation of a medication policy that describes the program's system for handling participant medications which is in compliance with the IDAPA 23.01.01, "Rules of the Board of Nursing."</p>	<p><i>1. What corrective action(s) will be taken? Agency will develop and implement written Administration Medication Handling policy and procedure which comply with IDAPA 23.01.01, "Rules of the Board of Nursing."</i></p> <p><i>2. How will the agency identify participants who may be affected by the deficiency(s)? Agency serves one participant and that one participant has been identified as affected by the deficiency. If participants are identified, what corrective action will be taken? Agency will develop and implement written Administration Medication Handling policy and procedure which comply with IDAPA 23.01.01, "Rules of the Board of Nursing." Staff will be trained in Medication Handling policy and training will be documented3. Who will be responsible for implementing each corrective action? The</i></p>	<p><i>7/1/2015</i></p>



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		<p><i>administrator will be responsible for implementing each corrective action.</i></p> <p><i>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Monitoring the Medication Handling policy will be occur during the scheduled Administrator's Quality Assurance done in the participant's home at least quarterly.</i></p>	
<p>16.04.17.501.06.b. The residential habilitation agency has failed to correct the deficiencies stated in the agency's accepted plan of correction and as verified by the Department, via resurveys.</p>	<p>A review of agency records has determined that the agency failed to correct deficiencies found during the agency's previous 2012 survey.</p> <p>Rule Citation 16.04.17.300. was also cited in 2012 survey. The agency failed to correct the deficiency as stated in their previous plan of correction.</p>	<p><i>1. What corrective action(s) will be taken? Agency will review its policies and procedures annually during the month of May.</i></p> <p><i>2. How will the agency identify participants who may be affected by the deficiency(s)? No participant was affected by agency not reviewing its policies and procedures annually.</i></p> <p><i>3. Who will be responsible for implementing each corrective action? The administrator.</i></p>	<p><i>6/1/2015</i></p>



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		4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? Annual review of policies and procedures will be added to the list of deficiencies, with special notation that this was a repeat deficiency. Administrator will receive instruction through use of a quality assurance handbook for <i>Overall Agency Evaluation</i> that contains monitoring instructions and forms.	

Agency Representative & Title: Jessi Webb, Administrator

* By entering my name and title, I agree to implement this plan of correction as stated above.

Date Submitted: 5/30/2015

Department Representative & Title: Kerrie Ann Hull, LMSW

* By entering my name and title, I approve of this plan of correction as it is written on the date identified.

Date Approved: 6/12/2015