



IDAHO DEPARTMENT OF  
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies

<b>Agency:</b>	Supported Living of Idaho LLC	<b>Region(s):</b>	4
<b>Agency Type:</b>	Residential Habilitation Agency	<b>Survey Dates:</b>	12/15/15-12/16/15
<b>Certificate(s):</b>	RHA-1069	<b>Certificate(s) Granted:</b>	<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)
16.04.17.301.03.a 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 employee is no longer employed by the agency, and must include at least the following: a. Name, current address and phone number of the employee; and (7-1-95)	Review of agency documentation revealed that 1 out of 6 employee files (employee #1) reviewed lacked the phone number for the employee.	<ol style="list-style-type: none"> <li>1. Administrator file added to QA. Phone number added to file affected.</li> <li>2. No other files were affected.</li> <li>3. Administrator</li> <li>4. QA</li> <li>5. 12/17/2015</li> </ol>	12/17/2015
16.04.17.301.03.b. 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 employee is no longer	Review of agency documentation revealed that 1 out of 6 employee files (employee #1) reviewed lacked the social security number for the employee.	<ol style="list-style-type: none"> <li>1. Administrator file added to QA. Social security number added to file affected.</li> <li>2. No other files were affected.</li> <li>3. Administrator</li> <li>4. QA</li> </ol>	12/17/2015



IDAHO DEPARTMENT OF  
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies

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)
employed by the agency, and must include at least the following: b. Social Security number; and (7-1-95)		5. 12/17/2015	
16.04.17.301.03.c. 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 employee is no longer employed by the agency, and must include at least the following: c. Education and experience; and (7-1-95)	Review of agency documentation revealed that 1 out of 6 employee files (employee #1) reviewed lacked information related to education and experience for the employee.	<ol style="list-style-type: none"> <li>1. Administrator file added to QA. Education and experience added to file affected.</li> <li>2. No other files were affected.</li> <li>3. Administrator</li> <li>4. QA</li> <li>5. 12/17/2015</li> </ol>	12/17/2015

<b>Agency Representative &amp; Title:</b> Pam Kaufman, Administrator <i>* By entering my name and title, I agree to implement this plan of correction as stated above.</i>	<b>Date Submitted:</b> 12/27/2015
<b>Department Representative &amp; Title:</b> 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>	<b>Date Approved:</b> 1/4/2016