



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies

Agency:	Pro Active Advantage, LLC	Region(s):	5
Agency Type:	DDA	Survey Dates:	03/22/16-03/24/16
Certificate(s):	DDA-1141 Gooding DDA-5065 Twin Falls	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)
<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>Three of six employee record review lacked documentation each employee is certified in CPR and 1st Aid within 90 days of hire and maintain current certification thereafter.</p> <p>For example: Employee 3's record lacked documentation the employee was CPR/1st Aid certified between 07/04/14 and 07/24/14 (20 day gap in certification). Employee 4's record lacked documentation the employee was CPR/1st Aid certified between 10/22/15-03/03/16. (4+ month gap) Employee 6's record lacked documentation the employee was CPR/1st Aid certified from date of hire: 07/09/15 to present as the employee only had a certificate of completion from Safe Schools Training intended for schools and does not include an expiration date or address age appropriate CPR and 1st Aid certification for the participants served.</p>	<p><i>1. Pro Active Advantage, is incorporating an audit tool that tracks all documentation and training required by Administrative Rule for DD Agencies. This tool will allow the HR Department to run weekly compliance reports so training can be monitored more closely. Employees will be notified 30 days prior to the expiration of their CPR/First Aid Certification or 90 day time frame from hire, and will be referred to a resource to obtain their certification within the required time frames. Failure to complete this requirement will result in that individual being pulled from service until the training is completed. Pro Active Advantage, will no long use Safe Schools as their training site for CPR/First Aid training. The agency will be utilizing a new resource in the Twin Falls area that provides face to face CPR/First Aid classes on a weekly basis. This resource provides a 2 year certification in CPR/First Aid. All employees who utilized the Safe Schools Training</i></p>	5/31/2016



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	<p>Repeat Deficiency from 04/30/12.</p>	<p><i>Site to fulfill the CPR/First Aid Training requirement have been notified as of 3/29/2016 that they must re-do their CPR/First Aid training with resource that provides 2 year certification.</i></p> <p><i>2. There were no participants directly impacted by this deficiency as there were no incidents during this period that required CPR/First Aid Interventions. The CPR/First Aid requirement will continue to be explained during New Hire Orientation on all employees. However, the HR Department will enhance this requirement in further orientation trainings so employees are well informed of the CPR/First Aid requirement and consequences for non-compliance. This action should prevent any impact on participants in the future.</i></p> <p><i>3. The HR Department, in conjunction with the Quality Assurance Staff (Supervisor and Administrative Assistants) will be responsible for implementing this action.</i></p> <p><i>4. The corrective actions will be monitored by the HR Manager and the DDA Administrative Assistance, with the implementation of the Audit tool.</i></p> <p><i>5. This corrective action will be completed by 5/31/2016.</i></p>	
<p>16.03.21.410.02.f. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to</p>	<p>One of six employee record review lacked documentation the employee received training per rule requirements.</p>	<p><i>1. The HR Department will utilize the audit tool programmed for DDA training compliance to track all training categories required by rule. Employees will be required to have training in</i></p>	<p>4/30/2016</p>



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<p>the participant is completed as follows: 02. Sufficient Training. Training of all staff must include the following as applicable to their work assignments and responsibilities: f. The proper implementation of all policies and procedures developed by the agency.</p>	<p>For example: Employee 2's record lacked documentation the employee received training on the proper implementation of all policies and procedures developed by the agency.</p>	<p><i>each category within the training year. Employees will be required to meet all 12 training categories and hourly requirement regardless of date of hire. All trainings on Administrative Rule provided by our QA consultant, HR Department, or Supervisory staff on policies and procedures will now be included in the training categories and certifications of completion will be entered into the employee's personnel file.</i></p> <p><i>2. There were no incidents identified where participants were impacted negatively by this citation. However, to prevent any issues in the future, all formal and in-formal trainings or discussion related to policy changes or amendments, will be documented in training categories, and entered into the DDA audit tool.</i></p> <p><i>3. The HR Department and Administrative Staff</i></p> <p><i>4. Compliance with IDAPA rule will be monitored by QA Reviews, and through the implementation of the DDA audit tool. The DDA Administrative Assistant will run weekly reports of compliance from the Audit Tool. These reports will be reviewed and acted upon by the HR Department and the Supervisory staff.</i></p> <p><i>5. To be completed by 4/30/2016</i></p>	
<p>16.03.21.500.04. 500.FACILITY STANDARDS FOR AGENCIES</p>	<p>One of two facilities lacked evidence the evacuation plans met rule requirements.</p>	<p><i>1. Evacuation Schematics located in all Pro Active Offices will be reviewed and updated to</i></p>	<p><i>4/30/2016</i></p>



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<p>PROVIDING CENTER-BASED SERVICES. The requirements in Section 500 of this rule, apply when an agency is providing center-based services.</p> <p>04. Evacuation Plans. Evacuation plans must be posted throughout the center. Plans must indicate point of orientation, location of all fire extinguishers, location of all fire exits, and designated meeting area outside of the building. (7-1-11)</p>	<p>For example: The Gooding evacuation plans did not indicate where all fire extinguishers were located.</p>	<p><i>include Fire Extinguisher locations, accurate escape routes with points of origin, location of first aid kits, and safe rooms.</i></p> <p><i>2. The HR Manager, has reviewed the schematic in each room, and each schematic is being revised to remedy the concerns.</i></p> <p><i>3. The HR Manager</i></p> <p><i>4. The HR Manager in conjunction with the maintenance staff, will conduct quarterly safety audits to insure that all schematics are up to date and accurate according to rule</i></p> <p><i>5. This will be completed by 4/30/2016.</i></p>	
<p>16.03.21.500.04.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>04. Evacuation Plans. Evacuation plans must be posted throughout the center. Plans must indicate point of orientation, location of all fire extinguishers, location of all fire exits, and designated meeting area outside of the building.</p> <p>a. The DDA must conduct quarterly fire drills. At least two (2) times each year these fire drills must include complete evacuation of the building. The DDA must document the amount of time it took to evacuate the building; and (7-1-11)</p>	<p>Two of two facilities lacked documentation the DDA conducted fire drills per rule requirements.</p> <p>For example: The Gooding facility fire drills for 02/29/16 and 11/30/15 lacked documentation of the amount of time it took to evacuate the building. The Twin Falls facility fire drill for 08/19/15 lacked documentation of the amount of time it took to evacuate the building.</p>	<p><i>1. DDA Staff will receive additional training on how to complete fire drill reports to meet compliance standards. This training will include how to conduct fire drills and complete fire drill logs to include the date of the drill, the time the alarm sounded, the time the drill was completed, and the number of participants and staff included in the drill along with any safety issues that need to be addressed to make sure the drill runs smoothly and participants are evacuated safely. Documentation of this training will be placed in the employee personnel files. This training will be completed by 4/30/2016.</i></p> <p><i>2. There are no incident reports identified that reflect negative impact to participants or staff. However, further training will be provided to prevent concerns in the future.</i></p>	<p>4/30/2016</p>



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		<p>3. The Human Resources Manager and the agency maintenance staff.</p> <p>4. The corrective action will be monitored by the HR Manager.</p> <p>5. The corrective action will be completed by 4/30/2016</p>	
<p>16.03.21.500.04.b. 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>04. Evacuation Plans. Evacuation plans must be posted throughout the center. Plans must indicate point of orientation, location of all fire extinguishers, location of all fire exits, and designated meeting area outside of the building.</p> <p>b. A brief summary of each fire drill conducted must be written and maintained on file. The summary must indicate the date and time the drill occurred, participants and staff participating, problems encountered, and corrective action(s) taken. (7-1-11)</p>	<p>One of two facilities lacked documentation the DDA conducted fire drills per rule requirements.</p> <p>For example: The Gooding fire drills for 02/29/16; 11/30/15 and 10/26/15 lacked the time the drill occurred. The Twin Falls fire drills for 08/19/15 lacked the time the drill occurred.</p>	<p>1. DDA Staff will receive additional training on how to complete fire drill reports to meet compliance standards. This training will include how to conduct fire drills and complete fire drill logs to include the date of the drill, the time the alarm sounded, the time the drill was completed, and the number of participants and staff included in the drill along with any safety issues that need to be addressed to make sure the drill runs smoothly and participants evacuated safely. Documentation of this training will be placed in the employee personnel files. This training will be completed by 4/30/2016.</p> <p>2. There are no incident reports identified that reflect negative impact to participants or staff. However, further training will be provided to prevent concerns in the future.</p> <p>3. The Human Resources Manager and the agency maintenance staff.</p> <p>4. The corrective action will be monitored by the HR Manager.</p> <p>5. The corrective action will be completed by 4/30/2016</p>	<p>4/30/2016</p>



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<p>16.03.21.600.02.a.i. 600. Each DDA must maintain records for each participant the agency serves. Each participant's record must include documentation of the participant's involvement in and response to the services provided. 02. Requirements for Participants Three to Twenty-One. For participants ages three (3) to twenty one (21), the following applies: a. For participants who are children enrolled in school, the local school district is the lead agency as required under Individuals with Disabilities Education Act (IDEA), Part B. The DDA must inform the child's home school district if it is serving the child during the hours that school is typically in session. i. The DDA participant's record must contain an Individualized Education Plan (IEP), including any recommendations for an extended school year. (7-1-11)</p>	<p>One of two participant record review lacked documentation of an Individualized Education Plan (IEP), including any recommendations for an extended school year.</p> <p>For example: Participant 1's record lacked documentation of an IEP. The plan started 11/15 and the record includes no evidence the agency attempted to obtain a copy of the IEP until 03/10/16.</p>	<ol style="list-style-type: none"> 1. <i>DDA will track and record all attempts to obtain documentation on participants. All attempts will be documented in the participants file, along with any confirmations of faxes, phone calls, and written inquiries. This information will be reviewed by the program supervisor to insure quality of care. Attempts to obtain documentation will be continued until some kind of confirmation is received.</i> 2. <i>Since the audit there have been continued efforts made to obtain the IEP of the participant reviewed during survey. The IEP in question was finally received on 3/31/2016 and has been included in the participant's record.</i> 3. <i>The DDA Administrative Assistant and Supervisory Staff</i> 4. <i>The DDA Administrative Assistant and Supervisory staff will track and review documentation to make sure that the information is correct and to ensure that the appropriate documentation reflects the findings. Verified receipt of information will also be reflected in the weekly reports from the DDA Audit tool, which will be discussed at supervisory and administrative QA staffing.</i> 5. <i>The deficiency regarding the IEP was</i> 	<p>3/31/2016</p>



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<p>16.03.21.900.01.d. 900. Each DDA defined under these rules must develop and implement a quality assurance program. 01. Purpose of the Quality Assurance Program. The quality assurance program is an ongoing, proactive, internal review of the DDA designed to ensure: d. Skill training activities are conducted in the natural setting where a person would commonly learn and utilize the skill, whenever appropriate; and (7-1-11)</p>	<p>One of four participant observations lacked evidence the agency ensures the skill training activities are conducted in the natural setting where a person would commonly learn and utilize the skill, whenever appropriate.</p> <p>For example: Participant 4 was observed in a group of two participants in the center working on math sheets. The two participants were instructed to add and subtract items on the sheet. The program implementation plan for learning the value and purchasing power of money by comparison shopping in the community. This goal was not implemented per the agency's program implementation plan instructions and was not conducted in the natural setting where the individual would commonly learn and utilize the skill.</p>	<p><i>corrected on 3/31/2016.</i></p> <ol style="list-style-type: none"> 1. <i>Worksheets will no longer be used to teach DDA activities, and will be replaced with tools/activities that can be generalized to real life situations. Staff identified in citation was trained on the importance of conducting activities in natural environments so the participant is able to practice the skill in a setting where the activity would most likely be utilized. This training was completed with employee on 3/22/2016, and certification of training will be placed in her personnel file.</i> 2. <i>Training that includes skill building in natural environments will be provided on an on-going basis to all DDA staff. HR is compiling training videos on teaching/training in natural environments for DDA populations.</i> 3. <i>The Supervisory Staff in coordination with their monthly trainings and observations, to insure that activities are conducted in natural environments. The HR Manager will follow up to insure that trainings associated with natural environments are included in the training categories.</i> 4. <i>The corrective actions will be monitored by the Supervisory Staff and HR Manager in conjunction with the implementation of the Audit Tool.</i> 5. <i>Worksheets will be discontinued</i> 	<p><i>3/22/2016</i></p>



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		<i>immediately. Staff identified in citation was trained on 3/22/2016. Implementation of training in natural environments will be included throughout the training year.</i>	
<p>16.03.21.900.02.e. 900. Each DDA defined under these rules must develop and implement a quality assurance program. 02. Quality Assurance Program Components. Each DDA's written quality assurance program must include e. An annual review of the agency's code of ethics, identification of violations, and implementation of an internal plan of correction; (7-1-11)</p>	<p>The agency lacked documentation an annual review of the agency's code of ethics was completed.</p> <p>For example: The agency had documentation of an annual review for 2015, but not for 2014.</p>	<p>1. <i>The HR Department will utilize the audit tool programmed for DDA to monitor compliance related to quality assurance activities such as review of code of ethics, and review of policies and procedures. This audit tool will provide a weekly report as to when QA activities are due. Annual documentation of the QA Review will be maintained for a period of 5 years for verification at survey.</i></p> <p>2. <i>There were no incident identified where participants or staff have been impacted by this deficiency. However, the DDA audit tool will be implemented to prevent this issue from happening in the future.</i></p> <p>3. <i>The QA Review will be conducted on an annual basis by the HR Department and Administration/Supervisory Staff in accordance with IDAPA Rule guidelines</i></p> <p>4. <i>The corrective action will be monitored through weekly reports generated by the DDA Audit tool that tracks critical compliance dates.</i></p> <p>5. <i>The next annual QA report is due 2/28/2017.</i></p>	<p>2/28/2017</p>
<p>16.03.21.900.02.f. 900. Each DDA defined under these rules must develop and implement a quality assurance program.</p>	<p>The agency lacked documentation an annual review of the agency's policy and procedure manual was completed.</p>	<p>1. <i>The HR Department, in conjunction with Management Team and QA consultant will review the agency policy and procedures on an annual basis. The date of the revision of each</i></p>	<p>2/28/2017</p>



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02. Quality Assurance Program Components. Each DDA's written quality assurance program must include f. An annual review of agency's policy and procedure manual to specify date and content of revisions made; and (7-1-11)	For example: The agency had documentation of an annual review for 2015, but not for 2014.	<i>policy, will be reflected in the table of contents in each policy manual.</i> <i>2. There are no incident reports that document this deficiency caused any negative impact on participants or staff. However, to prevent this issue from happening in the future, the DDA audit tool will be programmed to identify critical review dates as required by rule.</i> <i>3. The HR Department and DDA Administrative Assistant.</i> <i>4. The corrective actions will be monitored through review of the weekly reports generated by the DDA Audit tool which tracks critical review dates.</i> <i>5. The next QA Review is due 2/28/2017.</i>	

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Agency Representative & Title: Pat Marecki, Human Resources Manager <i>* By entering my name and title, I agree to implement this plan of correction as stated above.</i>	Date Submitted: 3/31/2016
Department Representative & Title: Pam Loveland-Schmidt, Licensing & Certification <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: 4/1/2016