



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies

Agency:	Family Counseling Service Inc.	Region(s):	4
Agency Type:	DDA	Survey Dates:	17 Jan – 18 Jan 2017
Certificate(s):	DDA-5341	Certificate(s) Granted:	<input type="checkbox"/> 6 - Month Provisional <input checked="" 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)
<p>16.03.21.410.02.d. 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: 02. Sufficient Training. Training of all staff must include the following as applicable to their work assignments and responsibilities: d. Adequate observation, review, and monitoring of staff, volunteer, and participant performance to promote the achievement of participant goals and objectives; (7-1-11)</p>	<p>Based on the review of agency records, it was determined that 1 out of 4 staff records reviewed did not contain the sufficient monitoring of staff .</p> <p>For example: Employee #1 did not have documentation of weekly face-to-face supervision with the clinical supervisor for a period of six (6) months while delivering services.</p>	<p>1. Action to be taken: The Clinical Administrator has designed an excel template to track each supervision session that occurs. This template is divided by month and will be monitored by the CA to ensure that each HS receives supervision weekly.</p> <p>2. The agency will identify other staff that may be affected by this deficiency by adding each DD provider to this excel sheet.</p> <p>3. Each providers supervision sessions will be recorded on this document when the note is turned in, and, as stated above, the document will be monitored by the CA to ensure all providers are</p>	<p>Plan was implemented Feb 10, 2017</p>



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		<p><i>receiving adequate supervision. If there is a deficiency identified by the Clinical Administrator, the CA will address the deficiency with the CS and, when needed create a plan of correction.</i></p> <p><i>4. This action plan has been implemented as of 2/10/17.</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</p>	<p>Based on the review of agency records, it was determined that 1 out of 4 staff records reviewed did not contain documentation of current CPR and first-aid.</p> <p>For example: Employee #2's CPR and first -aid certification expired in December 2016.</p>	<p><i>1. The CA has developed an excel tracking sheet to track when trainings have been completed and when they are due.</i></p> <p><i>2. The CA will add all DD Providers names to this tracker and will review this tracker on a monthly basis, as well as during QAP reviews.</i></p> <p><i>3. CA will send out reminders to Providers when a training is within 30 days of being due.</i></p> <p><i>4. CA will then follow up to ensure the training was completed during the next months review of this document.</i></p>	<p><i>2/10/2017</i></p>



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<p>ninety (90) days of hire and maintain current certification thereafter; and (7-1-11)</p>			
<p>16.03.21.410.01.b.i. 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 i. The agency must ensure that CPR and first-aid trained staff are present or accompany participants when services or DDA-sponsored activities are being</p>	<p>Based on the review of agency records, it was determined that the agency did not ensure that a CPR and first-aid trained staff was present when services were being provided.</p> <p>For example: Employee #2's CPR and first aid certification expired in December 2016 and the staff provided services without a certified CPR and first-aid staff being present.</p>	<p>1. Ca will monitor, through the use of the excel tracking sheet, all DD staff to make sure they are adequately trained in First Aid and CPR – and that these cradentials are currently active. 2. If a DD Provider has been found to have an expired CPR or First aid certification, either through self-report, or monitoring of the excel tracker, CA will enforce the policy where that Provider is not allowed to work with clients until they CPR and First aid training is current. Until the training has an effective date, a different FCS Provider will fill in who does have current trainings up to date. 3. This corrective action will continue to be monitored by the CA through the use of the excel tracker. 4. Plan has been implemented as of</p>	<p>2/10/2017</p>



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provided. (7-1-11)		2/10/17	
<p>16.03.21.410.01.b.ii. 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 ii. Each agency staff person must have age appropriate CPR and first aid certification for the participants he serves. (7-1-11)</p>	<p>Based on the review of agency records, it was determined that 1 out of 4 staff records reviewed did not contain documentation of current CPR and first-aid.</p> <p>For example: Employee #2's CPR and first -aid certification expired in December 2016.</p>	<p>1. <i>Ca will monitor, through the use of the excel tracking sheet, all DD staff to make sure they are adequately trained in First Aid and CPR – and that these cradentials are currently active.</i></p> <p>2. <i>If a DD Provider has been found to have an expired CPR or First aid certification, either through self-report, or monitoring of the excel tracker, CA will enforce the policy where that Provider is not allowed to work with clients until they CPR and First aid training is current. Until the training has an effective date, a differer FCS Provider will fill in who does have current trainings up to date.</i></p> <p>3. <i>This corrective action will continue to be monitored by the CA through the use of the excel tracker.</i></p> <p>4. <i>Plan has been implemented as of 2/10/17</i></p>	2/10/2017



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<p>16.03.21.410.03.a . 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: 03. Additional Training for Professionals. Training of all professional staff must include the following as applicable to their work assignments and responsibilities: a. Correct and consistent implementation of all participants' individual program plans and implementation plans, to achieve individual objectives; (7-1-11)</p>	<p>Based on the review of agency records, it was determined that 1 out of 4 staff records did not contain documented training of individual program plans and implementation plans.</p> <p>For example: Employee #2's records did not contain documentation that the employee had received client specific training for participant #2.</p>	<p>1. All new clients FCS receives will be reviewed with all staff present during each staff meeting. Staff will sign a form stating they have received client specific training. This form will be kept in clients file. If staff are not present during the staff meeting the CA or CS will be responsible to meeting with that member to train them specifically about that particular client. When a client starts services prior to a staff meeting the CA will meet with the newly assigned DD provider for that client and train the provider specifically about that particular clients circumstances.</p> <p>2. In addition, on the "client excel tracker" that tracks review due dates and other things – a new column will be added to document which providers have had specific training for that client. In the instance that a sub is needed, before the CA assigns the client to a sub, the CA will review the client excel trasker to ensure</p>	<p>3/1/2017</p>



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		<p><i>that provider has received client specific training. If the sub has not received client specific training, either the CS or CA will meet with the provider prior to provider rendering services and train the provider in the specifics about that client.</i></p> <p><i>3. The CA and/or CS, during the next staff meeting will train all DD staff on current clients. Any provider who must miss the next staff meeting, the CA will set up a private training to review the client and offer the specific training. Providers will sign the "Client specific training" form at the end of each client training.</i></p> <p><i>4. Corrective actions will be monitored by CA through reviewing of the newly made form each time it is used. The CA will keep record through the excel tracker of specifically who has been trained in each client. If a provider has not received training regarding a client, they may not work with that client until</i></p>	



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		<i>training has been accomplished. Those providers who had not been trained in each new client the CA or CS will meet with and review the trainings.</i>	
<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.</p> <p>02. Requirements for Participants Three to Twenty-One. For participants ages three (3) to twenty one (21), the following applies:</p> <p>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.</p>	<p>Based on the review of agency records, it was determined that 2 out of 2 participant records reviewed did not contain the participant's Individual Education Plan (IEP).</p> <p>For example: Participant #1 and #2's records did not contain the Individual Education Plans (IEP) from the participants current schools.</p>	<p>1. <i>The CA has created an "intake checklist" for all new clients. The IEP has now been included on this checklist. When a new client signs up for services through FCS, the CA will review the checklist – including the IEP – and collect all necessary documentation. FCS has developed a new ROI that includes a communication log for requests for the IEP as well as a release to send the school the DHW Plan.</i></p> <p>2. <i>The CA will review all current client files and follow the above procedure to collect all current clients IEPs.</i></p> <p>3. <i>All clients will have their files audited by the CA at the beginning of services and during each review. Monitoring of files will occur through this venue.</i></p> <p>4. <i>This corrective action for all new</i></p>	<p><i>3/1/2017</i></p>



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i. The DDA participant's record must contain an Individualized Education Plan (IEP), including any recommendations for an extended school year. (7-1-11)		<i>clients will be implemented immediately. This corrective plan for all current clients will be completed by the end of March.</i>	
<p>16.03.21.600.02.a.ii. 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.</p> <p>02. Requirements for Participants Three to Twenty-One. For participants ages three (3) to twenty one (21), the following applies:</p> <p>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.</p>	<p>Based on the review of agency records, it was determined that 2 out of 2 participant records reviewed did not contain documentation that the agency provided a current copy of the participant's plan of service to the participant's school.</p> <p>For example: Participant #1 and #2's records did not contain documentation that the agency had provided the plan of service to the participants current school.</p>	<p>1. <i>The CA has created an "intake checklist" for all new clients. The IEP has now been included on this checklist. When a new client signs up for services through FCS, the CA will review the checklist – including the IEP – and collect all necessary documentation. FCS has developed a new ROI that includes a communication log for requests for the IEP as well as a release to send the school the DHW Plan.</i></p> <p>2. <i>The CA will review all current client files and follow the above procedure to collect all current clients IEPs.</i></p> <p>3. <i>All clients will have their files audited by the CA at the beginning of services and during each review. Monitoring of files will occur through this venue.</i></p> <p>4. <i>This corrective action for all new</i></p>	<p><i>3/1/2017</i></p>



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li. The DDA must document that it has provided a current copy of the child's plan of service to the child's school. (7-1-11)		<i>clients will be implemented immediately. This corrective plan for all current clients will be completed by the end of March.</i>	
<p>16.03.21.601. 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</p>	<p>Based on the review of agency records, it was determined that 2 out of 2 participant records reviewed did not contain credentials of the staff providing the service.</p> <p>For example: Participant #1' and #2's records did not contain documentation of the habilitative support staffs credentials.</p>	<p>1. <i>The CA, during a new providers orientation, will train the new provider to always sign their name along with their credentials.</i></p> <p>2. <i>CA and/or CS will address current deficiencies during the next staff meeting – the second Friday in March. In addition the CA will send out an email to current providers stressing the importance of providers signing with their current credentials.</i></p> <p>3. <i>CA will do random reviews of documentation to provide continued monitoring of providers credentials.</i></p> <p>4. <i>If a provider forgets to add their credentials behind their name the CA will address this either through face to face meeting, or through email with the Provider.</i></p>	<p>3/1/2017</p>



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to provide past and current information and to safeguard participant confidentiality under these rules. (7-1-11)			
<p>16.03.21.905.03.a. 905. PARTICIPANT RIGHTS. Each DDA must ensure the rights provided under Sections 66-412 and 66-413, Idaho Code, as well as the additional rights listed in Subsection 905.02 of this rule, for each participant receiving DDA services.</p> <p>03.Method of Informing Participants of Their Rights. Each DDA must ensure and document that each person receiving services is informed of his rights in the following manner:</p> <p>a. Upon initiation of services, the DDA must provide each participant and his parent or guardian, where applicable, with a packet of information which outlines rights, access to grievance</p>	<p>Based on the review of agency records, it was determined that 2 out of 2 participant records reviewed did not contain advocacy service information.</p> <p>For example: Participant #1 and #2's records did not contain advocacy service information.</p>	<p>1. FCS has created a 1 page advocacy flyer that will be a part of the current FCS intake packet. Every new client will receive this flyer when they sign up for DD services through FCS.</p> <p>2. All current clients will be given this flyer through their current DD Providers. The CA will put copies in each DD Providers mail box to be given out to their current clients guardians over the next 2 weeks.</p> <p>3. This corrective action plan will be monitored by the CA who will ensure the advocacy flyer is in each intake packet that is given to each new client. A copy of this flyer will also be posted in the FCS waiting room.</p> <p>4. This plan was implemented as of 2/1/17</p>	<p>2/1/2017</p>



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procedures, and the names, addresses, and telephone numbers of protection and advocacy services. This packet must be written in easily understood terms. (7-1-11)			

Agency Representative & Title: Jennifer Browning CA

Date Submitted: 3/20/2017

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

Department Representative & Title: Sandi Frelly, Medical Program Specialist

Date Approved: 3/21/2017

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