IDAHO DEPARTMENT OF HEALTH & WELFARE

C.L. "BUTCH" OTTER – GOVERNOR
RICHARD M. ARMSTRONG – DIRECTOR

LESLIE M. CLEMENT—DEPUTY DIRECTOR
LICENSING AND CERTIFICATION
P.O. Box 83720
Boise, Idaho 83720-0036
PHONE 208-334-6626
FAX 208-364-1888

February 28, 2012

Cindy Zumr, Administrator
Employment Solutions, Inc.
260 South Cole Road, Suite 7
Boise, ID 83709

Dear Ms. Zumr:

Thank you for submitting the Plan of Correction for Employment Solutions, inc. dated February 24, 2012. The Department has reviewed and accepted the Plan of Correction in response to the Statement of Deficiencies issued as a result of the recertification survey concluded on February 6, 2012. As a result, we have issued Employment Solutions, Inc. a three year certificate effective from May 1, 2012, through April 30, 2015.

Thank you for your patience while accommodating us through the survey process. If you have any questions, you can reach me if at (208) 364-1906.

Sincerely,

ERIC D. BROWN
Supervisor
Developmental Disabilities Survey & Certification

EDB/slm

Submit by Email | Print Form

Statement of Deficiencies

Developmental Disabilities Agency

Employment Solutions, Inc.
4EMPLOM013

RECEIVED
FEB 27 2012
DIV. OF MEDICAID

260 S Cole Rd Ste 7
Boise, ID 83709
(208) 323-0883

Survey Type: Recertification

Entrance Date: 2/6/2012

Exit Date: 2/6/2012

Initial Comments: Survey Team: Eric Brown, Supervisor, Developmental Disabilities Survey & Certification.

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.21.410.01.b	Training	2. An audit of CPR/1st Aid certification status of all employees has been completed. All employees have current certifications. 3. Cindy Zumr, Administrator 4. CPR/1st Aid renewal dates for all employees have been included on a rotating yearly calendar. These renewal dates have also been added to a "reminder" list on the company computer. The Administrator will monitor both areas on a monthly basis. Training will be scheduled as necessary to maintain all staff certifications.
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: (7-1-11) 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: (7-1-11) b. Be certified in CPR and first aid within ninety (90) days of hire and maintain current certification thereafter; and (7-1-11)	Review of agency documentation revealed that CPR certification for [Staff #3] had expired and was not reviewed for approximately two weeks just prior to survey. (The agency corrected the deficiency during the course of the survey. The agency is required to answer questions 2-4 on the Plan of Correction).	

Scope and Severity: Isolated / No Actual Harm - Potential for Minimal Harm		**Date to be Corrected:**	**Administrator Initials:**
Administrator Signature (confirms submission of POC):			**Date:** 2/24/12
Team Leader Signature (signifies acceptance of POC):			**Date:** 2/22/12