



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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May 7, 2013

Carol Foster, Director
Addus Healthcare Boise
8601 West Emerald Street, Suite 100
Boise, ID 83704

Dear Ms. Foster:

Thank you for submitting the Plan of Correction for Addus Healthcare Boise dated May 3, 2013, in response to the recertification survey conducted on March 7, 2013. The Department has reviewed and accepted the Plan of Correction.

As a result, we have issued Addus Healthcare Boise a full one-year certificate effective from May 1, 2013, through April 30, 2014, unless otherwise suspended or revoked. Per IDAPA 16.04.17.101.02, this certificate is issued on the basis of substantial compliance and is contingent upon the correction of deficiencies.

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

Sincerely,

ERIC D. BROWN
Supervisor
DDA/ResHab Certification Program

EDB/slm

Enclosures

1. Approved Plan of Correction
2. Renewed Residential Habilitation Agency Certificate



Statement of Deficiencies

Residential Habilitation Agency

 Addus Healthcare Boise
 RHA-4476

 8601 W Emerald St Ste 100
 Boise, ID 83704
 (208) 342-1222

Survey Type: initial

Entrance Date: 3/6/2013

Exit Date: 3/7/2013

Initial Comments: Survey Team: Eric Brown, Supervisor, DDA/ResHab Certification Program; and Fredé Trenkle-MacAllister, Medical Program Specialist, DDA/ResHab Certification Program.

Deficiency ID	Findings	Reported Problem	Date of Deficiency	
16.03.10.705.01.b	<p>705. ADULT DD WAIVER SERVICES: PROVIDER QUALIFICATIONS AND DUTIES. All providers of waiver services must have a valid provider agreement with the Department. Performance under this agreement will be monitored by the Department. (3-19-07)</p> <p>01. Residential Habilitation – Supported Living. When residential habilitation services are provided by an agency, the agency must be certified by the Department as a Residential Habilitation Agency under IDAPA 16.04.17, "Rules Governing Residential Habilitation Agencies," and must supervise the direct services provided. Individuals who provide residential habilitation services in the home of the participant (supported living) must be employed by a Residential Habilitation Agency. Providers of residential habilitation services must meet the following requirements: (10-1-12)T</p>	<p>Based on review of agency personnel records, it was determined that 3 of 3 direct care providers (Employees 1, 3, and 5) lacked skill training provided by a Qualified Intellectual Disabilities Professional</p>	<p>On 3/12/2013, the Agency Director, the Addus HealthCare RN, and Addus HealthCare Service Coordinators were re-trained by a Targeted Service Coordinator on the necessary skills the caregivers are required to receive training on and the regulations of the DD Waiver program. The 3 caregivers found to be out of compliance had received skills training with the Addus Care Coordinator in error instead of receiving the training with a QIDP. All caregivers were re-training by the QIDP (Addus RN) on 3-21-2014. All documentation for this training is filed in the employee personnel files. All new employees hired to provide services to DD Waiver clients will receive skills training from the QIDP during new hire orientation and as needed upon acceptance of a new DD Waiver client.</p>	3-21-2013

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 No. 1447 P. 3

Residential Habilitation Agency	Addus Healthcare Boise		3/7/2013
<p>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>Orientations and trainings for this program will be conducted on an as-needed basis. To ensure that all required training has been completed, a training checklist was implemented 4/1/2013 and will be completed for all DD Waiver personnel. The Office Manager will verify the completion of this checklist and all required training when setting up new employees in the Addus HealthCare Horizon system.</p>	
Rule Reference(s)	Finding	Plan of Correction	Date of Correction
<p>16.04.17.101.04 101. CERTIFICATION - ISSUANCE OF CERTIFICATES. The Department will conduct an initial survey upon receipt of a completed application. (3-29-12) 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)</p>	<p>The agency failed to request renewal of its certificate no less than ninety (90) days before the expiration of the certificate.</p>	<p>The Addus HealthCare Contracts Department is responsible for all license and contract renewals. The Contracts Department utilizes the Addus Horizon system to track the expiration dates of each contract. The Contracts Department will notify the Agency Director 30 days prior to the 90 day notification deadline to ensure that the notification is sent timely. The Agency Director will work collaboratively with the Contracts Representative to complete any necessary forms and collect any necessary documents required for any contract renewals.</p>	<p>2013-04-01</p>

May. 3. 2013 7:52AM

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 No. 1447 P. 4

May. 3. 2013 7:52AM

Residential Habilitation Agency		Addus Healthcare Boise	
Task/Process	Training	Plan of Action	File # Start/End
<p>16.04.17.203.03</p> <p>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.</p> <p>Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 705. 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 agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12)</p> <p>03. Understanding of Participants' Needs. A basic understanding of the needs, desires, goals and objectives of participants served. (3-20-04)</p>	<p>Based on review of agency personnel records, it was determined that 3 of 3 direct care staff (Employees 1, 3, and 5) lacked training on understanding participants needs, desires, goals and objectives of the participant served.</p>	<p>New Orientation forms have been created and will be used with each employee. Agency Director, Staff RN and Care Coordinator will train on participant's needs, desires, goals, and objectives of the participant served. Each employee will have on-going in-services to make sure clients are being trained on goals, needs, desires and understanding of participant's weakness. Each employee that works with the client will review the Developmental Disability Assessment Summary to know history, needs, education, hobbies, desires, and goals. The staff will do this during Orientation or when we get a new client. Care Coordinator will do a quarterly visit to make sure we are meeting the needs of the client. The Quality Assessment will be given to Agency Director to review. Employee will be trained to let Agency know if there is a change of condition right away. completed on 3-29-2013</p>	<p>2013-03-29</p>

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 No. 1447 P. 5

May. 3. 2013 7:53AM

Rule Number/Text	Findings	Plan of Correction	Date to be Completed
<p>16.04.17.203.05</p> <p>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 agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12) 05. Review of Services. A review of the specific services that the participant requires. (3-20-04)</p>	<p>Based on review of agency personnel records, it was determined that 1 of 3 direct care providers (Employee 1) lacked training on review of specific services that the participant requires.</p>	<p>The Agency Director, Office Manager, Addus RN, Addus Client Care Coordinator, and the Addus Service Coordinator will be responsible for ensuring that all staff are appropriately trained. Caregivers will be trained on the specific needs of each client the service. Addus Service Coordinators will be responsible for reviewing a client's binder which includes the client's care plan, specific skills required, specific tasks to be completed, the client's schedule, and any other information pertinent to client care with his/her assigned caregiver. A Quality Assurance Check will be conducted every 3 months to ensure the Agency's compliance with training and documentation of client's needs. All client documentation and Quality Assurance Check forms will be reviewed by the Agency Director before filing in the client's file. If there are no issues reported or client change of condition observed, the documentation will be filed. All client grievance will be investigated and resolved by the Agency Director in accordance with the Addus Grievance Procedure policy. Any client change of conditions, care plan concerns, and service issues will be forwarded to the Addus RN for correction. 3-28-2013 completed.</p>	<p>2013-03-28</p>
<p>16.04.17.300.01</p> <p>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</p>	<p>Based on review of agency documentation, it was determined that the policy and procedure manual lacked Region 4 in the Scope of Services and Area Served section.</p>	<p>Addus HealthCare provides services to clients residing in Region 4. The Addus Policy and Procedure Manual was revised 4/1/13 to include Region 4 in the Scope and Services and Area Served section. A newly appointed Regional Quality Assurance Manager will be responsible for maintaining the Addus HealthCare Idaho Policy</p>	<p>2013-04-01</p>

Residential Habilitation Agency	Addus Healthcare Boise		3/7/2013
<p>must be reviewed annually and revised as necessary. The manual must, at a minimum, include policies and procedures reflecting the following: (3-20-04)</p> <p>01. Scope of Services and Area Served. Scope of services offered and geographic area served. (7-1-95)</p>		<p>and Procedure Manual and will work in collaboration with the Agency Director and Regional Director on all policy creation, implementation, and revisions. The Agency Director will notify the QA Manger of any contract or program regulation revisions/changes. To ensure that all regulation revisions are reviewed, the QA Manger will also periodically check all Idaho state resources for any IDAPA revisions and will revise the manual and any corresponding forms when necessary.</p>	
Rule Reference	Findings	Plan of Correction	Date of Correction
<p>16.04.17.301.03.i</p> <p>301. PERSONNEL</p> <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: (3-29-12)</p> <p>i. Evidence of current CPR and First Aid certifications; and (7-1-95)</p>	<p>Based on review of agency personnel records, it was determined that 1 of 4 service providers (Employee 4) lacked current CPR/First Aid certifications.</p>	<p>Employee #4 completed CPR/First Aid recertification on 3/28/2013. Employee certification expiration dates are tracked in the Addus HealthCare Horizon system via the Expiring Licenses Report. Service Coordinators must run the report monthly for the following month's expiration dates. All employees identified as having an impending expiration date, will be mailed a written notification of the expiring license/certification 60 days prior to the expiration date. A copy of the notification will be placed in the employee's file. The Service Coordinator will be responsible for following up with the employee until the certification is renewed. Any expired certifications will result in suspension until the</p>	<p>2013-03-28</p>

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No. 1447 P. 7

May. 3. 2013 7:54AM

Residential Habitation Agency	Aditus Healthcare Boise		3/7/2013
Findings	Findings	Plan of Correction	Date to be completed
<p>16.04.17.302.04</p> <p>302. SERVICE PROVISION PROCEDURES.</p> <p>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>Based on review of agency documentation, it was determined that the policy and procedures lacked a policy for medication standards.</p>	<p>Policy and Procedure Manual does have a policy for medication standards. This was placed in the Manual but was misfiled so you could not see it. See attached.</p> <p>Agency Director will make sure Policy and Procedure Manual is up to date and correct according to the IDAPA rules. The Policy for medications was reviewed by Agency RN and put into place. Policy and Procedure Manual has been up dated and reviewed by RN, Care Coordinator, and Agency Director on 3-21-2013.</p>	<p>2013-03-21</p>

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No. 1447 P. 8

May. 3. 2013 7:54AM

Residential Habilitation Agency

Addus Healthcare Boise

3/7/2013



16.04.17.400.02.a
400. PARTICIPANT RECORDS.
02. Required Information. Records must include at least the following information: (3-20-04)
a. Name, address and current phone number of the participant. (3-20-04)

Based on review of agency documentation, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked a phone number.

A new form was created that show participants phone number, gender, marital status, name of physician, dentist, and other health care providers. Agency Director will review all participant binders to make sure all information is in client binder. Office Manger will also review binder when inputting participant information into the computer. Office Manger, Care Coordinator will keep Agency Director informed of change of phone number and keep client binder up to date. completed on 3-21-2013
Care Coordinator will fax H&W of any changes

2013-03-21

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 No. 1447 P. 9

Title/Reference No.	Findings	Plan of Correction	Date of the Survey
<p>16.04.17.400.02.c 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) c. Gender and marital status. (3-20-04)</p>	<p>Based on review of agency documentation, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked gender and marital status.</p>	<p>A new form was created that show participants phone number, gender, marital status, name of physician, dentist, and other health care providers. Agency Director will be responsible to make sure that participant binder has the information on gender and marital status. When Care Coordinator does the QA every 3 months will also up date client binders if any changes. Any changes will be reported to Agency Director and to Office Manger so she can up date the computer system. Care Coordinator will fax any changes to H&W.</p>	<p>2013-04-01</p>
<p>18.04.17.400.02.e 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) e. Names, addresses, and current phone numbers of family, advocates, friends, and persons to be contacted in case of an</p>	<p>Based on review of agency documentation, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked names, addresses, and current phone numbers of family, advocates, friends, and persons to be contacted in case of an emergency.</p>	<p>A new form was created to include client's phone number, gender, marital status, name of physician, dentist, other health care providers, friends, emergency numbers and advocates that also work with client. Agency Director updated the Policy & Procedure Manuel with new forms. Office Manger will make sure forms are correct when inputting into the Horizon system.</p>	<p>2013-04-01</p>

May. 3. 2013 7:54AM

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No. 1447 P. 10

May 3 2013 7:55AM

Residential Habilitation Agency
emergency. (3-20-04)

Addus Healthcare Boise

3/7/2013

Criteria	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.400.02.f 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (7-1-95) f. Physician, dentist, and other health care providers.</p>	<p>Based on review of agency documentation, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked physician, dentist, and other health care providers.</p>	<p>A new form was created that show participants phone number, gender, marital status, name of physician, dentist, and other health care providers. New forms were up dated in the Policy & Procedure Manuel. Agency Director will make sure forms are filled out with the information needed. When Care Coordinator does the QA every 3 months will also make sure informatin is current. Any changes will report to Agency Director and Office Manger so she can update the computer. Care Coordinator will fax to H&W any changes.</p>	<p>2013-04-01</p>

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No. 1447 P. 11

May. 3. 2013 7:55AM

Findings	Findings	Plan of Correction	Date to be corrected
<p>16.04.17.400.02.g 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) g. A list of medications, diet, and all other treatments prescribed for the participant. (3-20-04)</p>	<p>Based on review of agency documentation, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked a list of medications, diet, and all other treatments prescribed for the participant.</p>	<p>A new form was created that shows participant medications, diet and any treatments prescribed for the participants. Agency Director created this form and was reviewed by Care Coordinator and put in the Policy & Procedure Manual. Agency Director will make sure this informational sheet gets in each participant binder. Office Manger will also review binder when inputting there information into our computer system. Care Coordinator will notify Office Manger and Agency Director if any changes are to be made in the clients binder. completed on 3-21-2013</p>	<p>2013-03-21</p>

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May 3 2013 7:55AM

Residential Habilitation Agency	Addus Healthcare Boise		3/7/2013
<div data-bbox="346 462 535 495">16.04.17.400.02.i</div> <div data-bbox="913 462 1102 495">Findings</div> <div data-bbox="1396 462 1585 495">Plan of Correction</div> <div data-bbox="1753 462 1858 495">Date</div>			
<p>16.04.17.400.02.i</p> <p>400. PARTICIPANT RECORDS.</p> <p>02. Required Information. Records must include at least the following information: (3-20-04)</p> <p>i. Results of an age appropriate functional assessment, and person centered plan. (7-1-95)</p>	<p>Based on review of agency documentation, it was determined that 1 of 1 participant record (Participant 1) lacked results of an age appropriate functional assessment.</p>	<p>Agency Director and Care Coordinator will be responsible to make sure the Developmental Disability Assessment Summary is completed on each participant and a Disability Services Support Plan is completed on each participant. Agency Director will make sure that the Targeted Service Coordinator will provide Addus HealthCare with copies of the Social Developmental Summary so the Addus RN or MSW can complete an accurate assessment. Agency Director will make sure information on this assessment will be place in the participants binder.</p> <p>completed on 4-1-2013</p>	<p>2013-04-01</p>

Rule Reference(s)	Findings	Plan of Correction	Date to be Completed
<p>16.04.17.400.02.j</p> <p>400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) j. Psychosocial information. (7-1-95)</p>	<p>Based on review of agency documentation, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked psychosocial information.</p>	<p>Agency Director will make sure that each client will have the psychosocial information in file before we start services.</p>	<p>2013-03-21</p>

Rule Reference(s)	Findings	Plan of Correction	Date to be Completed
<p>16.04.17.402.01.c</p> <p>402. PARTICIPANT RIGHTS. 01. Responsibilities. Each residential habilitation agency must develop and implement a written policy outlining the personal, civil, and human rights of all participants. The policy protects and promotes the rights of each participant and includes the following: (3-20-04)</p>	<p>Based on review of agency records, it was determined that 1 of 1 participant record reviewed (Participant 1) lacked documentation that the agency informed the participant of the services to be received, the expected benefits and attendant risks of receiving those services, of the right to refuse services, and alternative forms of services available.</p>	<p>See attached copy of Agency Policy and Procedure of mistreatment, neglect or abuse. Manual has been cleaned up and more organized. Agency Director did review Policy and Procedure Manual made it more user friendly. Agency Director updated the forms on services to be received, the benefits, risks, right to refuse services and other services available. When Office Manager inputs into computer will make sure forms are signed.</p>	<p>2013-03-21</p>

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No. 1447 P. 14

May. 3. 2013 7:56AM

Residential Habitation Agency	Addus Healthcare Boise	3/7/2013	
<p>c. Inform each participant, or legal guardian, of the services to be received, the expected benefits and attendant risks of receiving those services, and of the right to refuse services, and alternative forms of services available; (3-20-04)</p>		<p>Agency Director and Care Coordinator will make sure each participant record will reflect participant rights, expected benefits, services and alternative forms for services that are available. This is in the client binder there was a copy of the Statement of Consumer Rights see attached.</p>	
Case Reference ID	Finding	Resolution	Date Made Available
<p>16.04.17.405 405. TREATMENT OF PARTICIPANTS. The residential habilitation agency must develop and implement written policies and procedures including definitions that prohibit mistreatment, neglect or abuse of the participant to include at least the following: (3-20-04)</p>	<p>Based on review of the agency's policies and procedures, it was determined that there was no policy that included definitions that prohibit mistreatment, neglect, or abuse.</p>	<p>See attached copy of Agency Policy and Procedure of mistreatment, neglect or abuse. The new form has been implemented as part of the client welcome packet. The Service Coordinator will review the policy with the client upon intake and as needed. The client will acknowledge his/her understanding of the policy with a signature on the form. The Office Manger will review the client's binder to ensure all required documentation is complete when entering client data into the computer system. The Agency Director will be responsible to ensure that all systems are in place for appropriately respond to suspected or reported abuse. The Addus Policy and Procedure Manual was revised 4/1/13 to include the policy on mistreatment, neglect or abuse. A newly</p>	<p>2013-08-21</p>

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No. 1447 P. 15

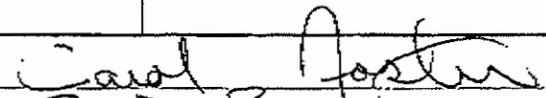
Residential Habilitation Agency

Addus Healthcare Boise

3/7/2013

appointed Regional Quality Assurance Manager will be responsible for maintaining the Addus HealthCare Idaho Policy and Procedure Manual and will work in collaboration with the Agency Director and Regional Director on all policy creation, implementation, and revisions. The Agency Director will notify the QA Manger of any contract or program regulation revisions/changes. To ensure that all regulation revisions are reviewed, the QA Manger will also periodically check all Idaho state resources for any IDAPA revisions and will revise the manual and any corresponding forms when necessary.

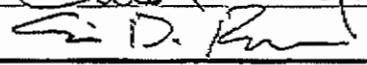
Administrator/Provider Signature:



Date:

5-3-13

Department POC Approval Signature:



Date:

5/3/13

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

May. 3. 2013 7:56AM