



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

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April 29, 2013

CERTIFIED MAIL #: 7012 1010 0002 0836 3523

Vance Walker, Administrator  
Adolescent and Child Development Center, LLC  
151 North 3<sup>rd</sup> Avenue, Suite 110  
Pocatello, ID 83201-6367

Dear Mr. Walker:

Thank you for submitting the Plan of Correction for Adolescent and Child Development Center, LLC. DDA/ResHab Certification Program staff have reviewed and accepted the Plan of Correction in response to the Department's recertification survey findings of March 15, 2013. As a result, we have issued Adolescent and Child Development Center, LLC a **provisional** certificate effective from April 16, 2013, through October 13, 2013.

This provisional certificate is issued per IDAPA 16.03.21.126.01, which states:

***Provisional Certificate.** When a DDA is found to be out of substantial compliance with these rules but does not have deficiencies that jeopardize the health or safety of participants, a provisional certificate may be issued by the Department for up to a six-(6) month period. A provisional certificate is issued contingent upon the correction of deficiencies in accordance with a plan developed by the agency and approved by the Department. Before the end of the provisional certification period, the Department will determine whether areas of concern have been corrected and whether the agency is in substantial compliance with these rules. If so, then certification will be granted. If not, the certificate will be denied or revoked.*

The survey team will enter your agency prior to October 13, 2013, to conduct an on-site follow-up survey to assure that all corrections have been completed. Your agency's continued participation in the DDA program is dependent upon the Department's determination of whether your Plan of Correction has been implemented and substantial compliance achieved during the provisional period. I urge you to closely monitor your quality assurance processes, particularly in those areas listed in the Statement of Deficiencies resulting from the recertification survey of March 15, 2013.

Vance Walker, Administrator  
April 29, 2013  
Page 2 of 2

Pursuant to IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings," Section 300, you may request an administrative review to appeal the Department's decision to issue a provisional certificate. The request must be made in writing within 28 days of this notice, identify the challenged decision, state specifically the grounds for your contention that the Department's decision was erroneous, and be signed by the agency's administrator. Administrative review requests may be addressed to:

**Tamara Prisock, Administrator**  
**Division of Licensing & Certification**  
**P.O. Box 83720**  
**Boise, ID 83720-0009**  
**Fax: (208) 287-1164**

Upon receipt of a complete timely written request, an administrative review conference will be scheduled and conducted in accordance with IDAPA 16.05.03.300.

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

Sincerely,



ERIC D. BROWN  
Supervisor  
DDA/ResHab Certification Program

EDB/slm

Enclosures

1. Provisional Developmental Disabilities Agency Certificate
2. Approved Plan of Correction



# Statement of Deficiencies

Developmental Disabilities Agency

Adolescent and Child Development Center, LLC  
06AACDC158

151 N 3rd Ave Ste 110  
Pocatello, ID 83201-6369  
(208) 232-5622

**Survey Type:** Recertification

**Entrance Date:** 3/12/2013

**Exit Date:** 3/15/2013

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

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.03.10.651 651. DDA SERVICES: COVERAGE REQUIREMENTS AND LIMITATIONS. Developmental disabilities agency services must be recommended by a physician or other practitioner of the healing arts. The following therapy services are reimbursable when provided in accordance with these rules. (7-1-11)	<p>Review of agency records revealed that 2 of 2 adult participants (Participants 1 and 2) and 1 of 1 child participant documents (Participants A) lacked a recommendation by a physician.</p> <p>For example:</p> <p>Participant 1's physician's referral expired on January 13, 2013.</p> <p>Participant 2's physician's referral expired on January 30, 2013.</p> <p>Participant A had a physician's referral that expired on September 28, 2012, and did not receive another physician's referral until March 5, 2013.</p>	<ol style="list-style-type: none"> <li>1. What corrective action(s) will be taken? Physician's orders will be obtained for all participants and will be maintained in the records, without gaps, henceforth.</li> <li>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented.</li> <li>3. Who will be responsible for implementing each corrective action? The administrator or designee</li> <li>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, during annual redeterminations, and ongoing.</li> </ol>	2013-05-15

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.651.02</p> <p>651. DDA SERVICES: COVERAGE REQUIREMENTS AND LIMITATIONS. Developmental disabilities agency services must be recommended by a physician or other practitioner of the healing arts. The following therapy services are reimbursable when provided in accordance with these rules. (7-1-11)</p> <p>02. Requirements to Deliver Developmental Therapy. Developmental therapy may be delivered in a developmental disabilities agency center-based program, the community, or the home of the participant. Participants living in a certified family home must not receive home-based developmental therapy in a certified family home. Developmental therapy includes individual developmental therapy and group developmental therapy. Developmental therapy services must be delivered by Developmental Specialists or paraprofessionals qualified in accordance with these rules, based on a comprehensive developmental assessment completed prior to the delivery of developmental therapy. (7-1-12)T</p>	<p>Review of agency documents revealed that the comprehensive developmental assessment did not reflect current developmental therapy for 1 of 2 adult participant records (Participant1). Developmental therapy must be based on a comprehensive developmental assessment.</p> <p>Participant 1's comprehensive developmental assessment stated that participant greeted people independently. A goal was identified for developmental therapy to work on greeting people.</p>	<p>1. What corrective action(s) will be taken? The developmental assessment for the participant will be updated to reflect his/her current status.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	<p>2013-05-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.655.02.a.ii</p> <p>655. DDA SERVICES: PROCEDURAL REQUIREMENTS.</p> <p>02. Comprehensive Assessments Conducted by the DDA. Assessments must be conducted by qualified professionals defined under Section 657 of these rules for the respective discipline or areas of service. (7-1-11)</p> <p>a. Comprehensive Assessments. A comprehensive assessment must: (7-1-11)</p> <p>ii. Determine the participant's needs; (7-1-11)</p>	<p>Review of agency documents revealed that 1 of 2 adult participant comprehensive assessments (Participant 1) lacked a determination of the participant's needs</p> <p>For example, Participant 1's comprehensive assessment stated that the participant greets people independently. Greeting people is a goal on the Individual Support Plan.</p>	<p>1. What corrective action(s) will be taken? The developmental assessment for the participant will be updated to reflect his/her current needs.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.655.03.a</p> <p>655. DDA SERVICES: PROCEDURAL REQUIREMENTS.</p> <p>03. Requirements for Current Assessments. Assessments must accurately reflect the current status of the participant. (7-1-11)</p> <p>a. To be considered current, assessments must be completed or updated at least every two (2) years for service areas in which the participant is receiving services on an ongoing basis. (3-29-12)</p>	<p>Review of agency documents revealed that 1 of 2 adult participant records (Participant 1) lacked a current assessment.</p> <p>For example, Participant 1's assessment was dated July 1, 2010, which was over two (2) years old. The participant received services on an ongoing basis.</p>	<p>1. What corrective action(s) will be taken? The assessment for the participant will be completed to reflect his/her current status.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	2013-05-15
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.655.03.b</p> <p>655. DDA SERVICES: PROCEDURAL REQUIREMENTS.</p> <p>03. Requirements for Current Assessments. Assessments must accurately reflect the current status of the participant. (7-1-11)</p> <p>b. Assessments or updates are required in</p>	<p>Review of agency documentation revealed that 1 of 2 adult participant records (Participant 1) lacked documentation from the professional stating that the latest assessment accurately represented the status of the participant or whether a full assessment or an updated assessment was required for the purpose of</p>		2013-05-15

disciplines in which services are being delivered and when recommended by a professional. At the time of the required review of the assessment(s), the qualified professional in the respective discipline must determine whether a full assessment or an updated assessment is required for the purpose of reflecting the participant's current status in that service area. If, during the required review of the assessment(s), the latest assessment accurately represents the status of the participant, the file must contain documentation from the professional stating so. (3-29-12)

reflecting the participant's current status in the service area.

1. What corrective action(s) will be taken?  
The assessment for the participant will be updated to reflect his/her current status.
2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?  
All participant files will be reviewed and the corrective actions described in #1 will be implemented.
3. Who will be responsible for implementing each corrective action?  
The administrator or designee
4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules?  
The corrective actions will be monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.655.03.e 655. DDA SERVICES: PROCEDURAL REQUIREMENTS. 03. Requirements for Current Assessments. Assessments must accurately reflect the current status of the participant. (7-1-11) e. Assessments must be completed or obtained prior to the delivery of therapy in each type of service. (3-29-12)</p>	<p>Review of agency documentation revealed that 1 of 1 child participant record (Participant A) lacked an assessment that was completed or obtained prior to the delivery of therapy</p> <p>The agency requested and received the assessment during the survey on March 14, 2013.</p>		<p>2013-05-15</p>

		<p>1. What corrective action(s) will be taken? The developmental assessment for the participant will be updated to reflect his/her current status. All assessments will be completed prior to therapy.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	
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<b>Rule Reference/Text</b>	<b>Findings</b>	<b>Plan of Correction</b>	<b>Date to be Corrected</b>
<p>16.03.10.655.03.f.iii</p> <p>655. DDA SERVICES: PROCEDURAL REQUIREMENTS.</p> <p>03. Requirements for Current Assessments. Assessments must accurately reflect the current status of the participant. (7-1-11)</p> <p>f. A current psychological assessment must be updated in accordance with Subsection 655.03.f. of these rules: (3-29-12)</p> <p>iii. When a participant has been diagnosed with mental illness; or (7-1-11)</p>	<p>Based on review of agency documentation, it was determined that 1 of 2 adult participant records (Participant 1) lacked a current psychological assessment when the participant had been diagnosed with a mental illness.</p>	<p>1. What corrective action(s) will be taken? A psychological assessment for the participant will be obtained.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p>	



		<p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.655.06.e 655. DDA SERVICES: PROCEDURAL REQUIREMENTS. 06. Requirements for Specific Skill Assessments. Specific skill assessments must: (7-1-11) e. Determine Baselines. Be used to determine baselines and develop the program implementation plan. (7-1-11)</p>	<p>Based on review of agency documentation, it was determined that 1 of 2 adult participant records (Participant 1) revealed that the skill assessment was not used to determine baselines and develop the program implementation plan.  For example, Participant 1's skill assessment documented a 3 (indicating "does very well on greeting people"). Greeting people was listed as an objective on the program implementation plan.</p>	<p>1. What corrective action(s) will be taken? The skill assessment for the participant will be updated to reflect his/her current status. All assessments will be used to determine baselines. 2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant files will be reviewed and the corrective actions described in #1 will be implemented. 3. Who will be responsible for implementing each corrective action? The administrator or designee 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	<p>2013-05-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.658.01.b.i</p> <p>658. GENERAL STAFFING REQUIREMENTS FOR AGENCIES.</p> <p>01. Standards for Paraprofessionals Providing Developmental Therapy and IBI. When a paraprofessional provides either developmental therapy or IBI, the agency must ensure adequate supervision by a qualified professional during its service hours. All paraprofessionals must meet the training requirements under IDAPA 16.03.21, "Developmental Disabilities Agencies (DDA)," Section 410 and must meet the qualifications under Section 657 of these rules. A paraprofessional providing IBI must be supervised by an IBI professional; a paraprofessional providing developmental therapy must be supervised by a Developmental Specialist. Paraprofessionals providing developmental therapy to children birth to three (3) years of age must work under the supervision of a Developmental Specialist fully qualified to provide services to participants in this age group. For paraprofessionals to provide developmental therapy or IBI in a DDA, the agency must adhere to the following standards: (7-1-11) b. Frequency of Supervision. The agency must ensure that a professional qualified to provide the service must, for all paraprofessionals</p>	<p>Review of agency documentation revealed that the files for 4 of 7 staff (Employees 1, 2, 3, and 4) did not contain documentation that each received weekly supervision including instruction from the professional.</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive weekly supervision to include all rule requirements</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	<p>2013-05-15</p>

under his supervision, on a weekly basis or more often if necessary: (7-1-11)  
i. Give instructions; (7-1-11)

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.658.01.b.ii</p> <p>658. GENERAL STAFFING REQUIREMENTS FOR AGENCIES.</p> <p>01. Standards for Paraprofessionals Providing Developmental Therapy and IBI. When a paraprofessional provides either developmental therapy or IBI, the agency must ensure adequate supervision by a qualified professional during its service hours. All paraprofessionals must meet the training requirements under IDAPA 16.03.21, "Developmental Disabilities Agencies (DDA)," Section 410 and must meet the qualifications under Section 657 of these rules. A paraprofessional providing IBI must be supervised by an IBI professional; a paraprofessional providing developmental therapy must be supervised by a Developmental Specialist.</p> <p>Paraprofessionals providing developmental therapy to children birth to three (3) years of age must work under the supervision of a Developmental Specialist fully qualified to provide services to participants in this age group. For paraprofessionals to provide developmental therapy or IBI in a DDA, the agency must adhere to the following standards: (7-1-11)</p> <p>b. Frequency of Supervision. The agency must ensure that a professional qualified to provide the service must, for all paraprofessionals under his supervision, on a weekly basis or more often if necessary: (7-1-11)</p> <p>ii. Review progress; and (7-1-11)</p>	<p>Review of agency documentation revealed that the files for 4 of 7 staff (Employees 1, 2, 3, and 4) did not contain documentation that each received weekly supervision including a review of progress from the professional.</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive weekly supervision to include all rule requirements</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	<p>2013-05-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.658.01.b.iii</p> <p>658. GENERAL STAFFING REQUIREMENTS FOR AGENCIES.</p> <p>01. Standards for Paraprofessionals Providing Developmental Therapy and IBI. When a paraprofessional provides either developmental therapy or IBI, the agency must ensure adequate supervision by a qualified professional during its service hours. All paraprofessionals must meet the training requirements under IDAPA 16.03.21, "Developmental Disabilities Agencies (DDA)," Section 410 and must meet the qualifications under Section 657 of these rules. A paraprofessional providing IBI must be supervised by an IBI professional; a paraprofessional providing developmental therapy must be supervised by a Developmental Specialist. Paraprofessionals providing developmental therapy to children birth to three (3) years of age must work under the supervision of a Developmental Specialist fully qualified to provide services to participants in this age group. For paraprofessionals to provide developmental therapy or IBI in a DDA, the agency must adhere to the following standards: (7-1-11)</p> <p>b. Frequency of Supervision. The agency must ensure that a professional qualified to provide the service must, for all paraprofessionals under his supervision, on a weekly basis or more often if necessary: (7-1-11)</p> <p>iii. Provide training on the program(s) and procedures to be followed. (7-1-11)</p>	<p>Review of agency documentation revealed that the files for 4 of 7 staff (Employees 1, 2, 3, and 4) did not contain documentation that each received weekly supervision including training on programs and procedures to be followed from the professional.</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive weekly supervision to include all rule requirements</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	<p>2013-05-15</p>
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.125</p> <p>125. RENEWAL AND EXPIRATION OF THE</p>	<p>The agency did not submit a formal request for the renewal of its developmental disabilities</p>		<p>2013-05-31</p>

<p><b>CERTIFICATE.</b> An agency must request renewal of its certificate no less than ninety (90) days before the expiration date of the certificate, to ensure there is no lapse in certification. The request must contain any changes in optional services provided and outcomes of the internal quality assurance processes required under Section 900 of these rules.(7-1-11)</p>	<p>agency certificate.</p>	<p>1. What corrective action(s) will be taken? All agency staff will submit a request for recertification at least 90 days prior to the next survey. 2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? There are no adverse affects to participants. 3. Who will be responsible for implementing each corrective action? The administrator or designee 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, prior to survey, and ongoing.</p>	
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Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.400.01 400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES. Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. (7-1-11) 01. Agency Administrator Duties. The agency administrator is accountable for the overall operations of the agency including ensuring compliance with this chapter of rules, overseeing and managing staff, developing</p>	<p>Review of agency documentation revealed that the agency administrator had not ensured compliance with the rules governing developmental disabilities agencies, oversight and management of staff, implementation of written policies and procedures, or oversight the agency's quality assurance program.</p>		<p>2013-05-15</p>

and implementing written policies and procedures, and overseeing the agency's quality assurance program. (7-1-11)

1. What corrective action(s) will be taken?  
The administrator will ensure compliance for the agency to include all rule requirements. Outside training will be obtained emphasizing compliance.

2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?  
All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.

3. Who will be responsible for implementing each corrective action?  
The administrator

4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules?  
The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.400.03.a</p> <p>400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES. Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. (7-1-11)</p> <p>03. Clinical Supervisor Duties. A clinical supervisor must be employed by the DDA on a continuous and regularly scheduled basis and be readily available on-site to provide for: (7-1-11)</p> <p>a. The supervision of service elements of the agency, including face to face supervision of agency staff providing direct care services; and</p>	<p>Review of agency documentation revealed that 4 of 4 paraprofessional staff files reviewed (Employees 1, 2, 3, and 4) did not contain documentation that face-to-face supervision of agency staff providing direct care was completed by the agency's clinical supervisor.</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive face to face supervision to include all rule requirements by the clinical supervisor.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p>	<p>2013-05-15</p>

(7-1-11)

4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.400.03.b                      400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES.                      Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. (7-1-11)                      03. Clinical Supervisor Duties. A clinical supervisor must be employed by the DDA on a continuous and regularly scheduled basis and be readily available on-site to provide for: (7-1-11)                      b. The observation and review of the direct services performed by all paraprofessional and professional staff on at least a monthly basis, or more often as necessary, to ensure staff demonstrate the necessary skills to correctly provide the DDA services. (7-1-11)</p>	<p>Review of agency records revealed that the files for 4 of 7 staff (Employees 1, 2, 3, and 4) lacked documentation they had been formally observed by the clinical supervisor on a monthly basis.</p>	<p>1. What corrective action(s) will be taken?                      All agency staff will receive monthly observations to include all rule requirements by the clinical supervisor.                      2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?                      All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.                      3. Who will be responsible for implementing each corrective action?                      The administrator or designee                      4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules?                      The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	<p>2013-05-15</p>

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<p>16.03.21.400.07.b</p> <p>400. GENERAL STAFFING REQUIREMENTS FOR AGENCIES. Each DDA is accountable for all operations, policy, procedures, and service elements of the agency. (7-1-11)</p> <p>07. Paraprofessionals. A person qualified to provide support services must meet the following minimum requirements: (7-1-11)</p> <p>b. Have received instructions in the needs of the participant who will be provided the service; and (7-1-11)</p>	<p>Review of agency documentation revealed that the files for 4 of 7 staff (Employees 1, 2, 3, and 4) did not contain documentation that each received instruction on the needs of the participant who was provided the service.</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive instruction to include all rule requirements.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	<p>2013-05-15</p>



Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.410.01</p> <p>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)</p> <p>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)</p>	<p>Review of agency records revealed that the files for 2 of 7 staff (Employees 1 and 4) did not contain documentation that each received 12 hours of formal training during the 2012 calendar year.</p> <p>During 2012, Employee 1 received 5.75 hours of documented formal training. Employee 4 received 3.75 hours of documented formal training.</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive 12 hours of training and will include all rule requirements by the end of 2013.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	<p>2013-05-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.410.01.a</p> <p>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)</p> <p>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)</p> <p>a. Participate in fire and safety training upon employment and annually thereafter; and (7-1-11)</p>	<p>Review of agency records revealed that the files for 2 of 7 staff (Employees 1 and 4) did not contain documentation that each received fire safety training between November 9, 2011, and the date of the agency's recertification survey (March 12, 2013).</p>	<p>1. What corrective action(s) will be taken? All agency staff will receive fire and safety training and will include all rule requirements.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	<p>2013-05-15</p>
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.500.02</p> <p>500. FACILITY STANDARDS FOR AGENCIES PROVIDING CENTER-BASED SERVICES. The requirements in Section 500 of this rule, apply when an agency is providing center-</p>	<p>During the walkthrough and review of the agency's center location, it was noted that one of the escape routes, as identified on the evacuation route map, directed evacuees into a dark hallway where the door and door handle to be utilized for escape could not be seen.</p>	<p>Please refer to the questions on the cover sheet to formulate your Plan of Correction. Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages. You may overwrite the instructions in this field.</p>	

<p>based services. (7-1-11)</p> <p>02. Environment. The facilities of the agency must be designed and equipped to meet the needs of each participant including factors such as sufficient space, equipment, lighting, and noise control. (7-1-11)</p>	<p>This was corrected during survey and a sign was placed on the wall to remind staff to leave the lights on during service provision. The agency is required to answer questions 1-4 on the Plan of Correction.</p>	<p>1. What corrective action(s) will be taken? The agency will train all staff to leave lights on during service provision.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.500.03.a</p> <p>500. FACILITY STANDARDS FOR AGENCIES PROVIDING CENTER-BASED SERVICES.</p> <p>The requirements in Section 500 of this rule, apply when an agency is providing center-based services. (7-1-11)</p> <p>03. Fire and Safety Standards. (7-1-11)</p> <p>a. Buildings on the premises must meet all local and state codes concerning fire and life safety that are applicable to a DDA. The owner or operator of a DDA must have the center inspected at least annually by the local fire authority and as required by local city or county ordinances. In the absence of a local fire authority, such inspections must be obtained</p>	<p>Review of agency records revealed that a fire inspection by the local fire authority was not completed annually. The agency did obtain a fire inspection during the recertification survey (March 12, 2013) but did not possess documentation of a previous inspection being completed.</p>	<p>1. What corrective action(s) will be taken? The fire inspection will obtained and maintained annually.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p>	<p>2013-05-15</p>

from the Idaho State Fire Marshall's office. A copy of the inspection must be made available to the Department upon request and must include documentation of any necessary corrective action taken on violations cited; (7-1-11)

4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews to include facility inspections.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.500.04.a-b</p> <p><b>500. FACILITY STANDARDS FOR AGENCIES PROVIDING CENTER-BASED SERVICES.</b></p> <p>The requirements in Section 500 of this rule, apply when an agency is providing center-based services. (7-1-11)</p> <p><b>04. Evacuation Plans.</b> 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>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>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</p>	<p>Review of agency documentation revealed that the agency lacked evidence that quarterly fire drills had been conducted in the agency's center prior to January 2, 2013.</p>	<p>1. What corrective action(s) will be taken? The agency will ensure quarterly fire drills are conducted and documented.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	<p>2013-05-15</p>

corrective action(s) taken. (7-1-11)

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.500.05.b</p> <p>500. FACILITY STANDARDS FOR AGENCIES PROVIDING CENTER-BASED SERVICES.</p> <p>The requirements in Section 500 of this rule, apply when an agency is providing center-based services. (7-1-11)</p> <p>05. Food Safety and Storage. (7-1-11)</p> <p>b. When the agency does not provide food service for participants, it must keep refrigerators and freezers used to store participant lunches and other perishable foods in good repair and equipped with an easily readable thermometer. Refrigerators must be maintained at forty-one degrees Fahrenheit (41°F) or below. Freezers must be maintained at ten degrees Fahrenheit (10°F) or below. (7-1-11)</p>	<p>During the walkthrough and review of the agency's center location, it was determined that the freezer did not contain a thermometer.</p> <p>This deficiency was corrected during survey. The agency is required to answer questions 2-4 on the Plan of Correction.</p>	<p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?</p> <p>There are no adverse affects from the deficiency for participants.</p> <p>3. Who will be responsible for implementing each corrective action?</p> <p>The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, and ongoing.</p>	

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.501.05</p> <p>501. VEHICLE SAFETY REQUIREMENTS. Each DDA that transports participants must: (7-1-11)</p> <p>05. Liability Insurance. Continuously maintain liability insurance that covers all passengers and meets the minimum liability insurance requirements under Idaho law. If an agency employee transports participants in the employee's personal vehicle, the agency must ensure that adequate liability insurance coverage is carried to cover those circumstances. (7-1-11)</p>	<p>Review of agency records revealed that the documentation used to verify current automobile insurance coverage for 3 of 7 staff (Employees 3, 4, and 7) was expired in their personnel files.</p> <p>For example, Employee 3's verification expired on September 8, 2012; Employee 4's verification expired on June 25, 2011; and Employee 7's verification expired on March 3, 2013.</p>	<p>1. What corrective action(s) will be taken? The agency will obtain current insurance coverage for all staff that transport participants. No staff will be allow to transport participants without insurance coverage documented in their records.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, monthly supervision, weekly supervision, and ongoing.</p>	<p>2013-05-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.600.02.a.i</p> <p>600. PROGRAM DOCUMENTATION REQUIREMENTS. Each DDA must maintain records for each participant the agency serves. Each participant's record must include documentation of the</p>	<p>Based on review of agency documents, it was determined that 1 of 1 child participant records (Participant A) lacked an Individualized Education Plan.</p>		<p>2013-05-15</p>

participant's involvement in and response to the services provided. (7-1-11)  
 02. Requirements for Participants Three to Twenty-One. For participants ages three (3) to twentyone (21), the following applies: (7-1-11)  
 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. (7-1-11)  
 i. The DDA participant's record must contain an Individualized Education Plan (IEP), including any recommendations for an extended school year. (7-1-11)

1. What corrective action(s) will be taken?  
 The agency will obtain the IEP for the participant.  
 2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?  
 All child participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.  
 3. Who will be responsible for implementing each corrective action?  
 The administrator or designee  
 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules?  
 The corrective actions will monitored in formal quarterly quality assurance reviews, annual redeterminations and ongoing.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.03.21.600.02.a.ii 600. PROGRAM DOCUMENTATION REQUIREMENTS. 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. (7-1-11) 02. Requirements for Participants Three to Twenty-One. For participants ages three (3) to twentyone (21), the following applies: (7-1-11) a. For participants who are children enrolled in school, the local school district is the lead agency as required under Individuals with	Based on review of agency documents, it was determined that 1 of 1 child participant record (Participant A) lacked documentation that the agency provided a current copy of the plan of service to the child's school.	1. What corrective action(s) will be taken? The agency will provide a copy of the plan of services to the school for the participant. 2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All child participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented. 3. Who will be responsible for implementing each corrective action? The administrator or designee	2013-05-15

<p>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. (7-1-11)                  ii. 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)</p>		<p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual redeterminations and ongoing.</p>	
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Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.601.01.d                      601. RECORD REQUIREMENTS.                      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 to provide past and current information and to safeguard participant confidentiality under these rules. (7-1-11)                      01. General Records Requirements. Each participant record must contain the following</p>	<p>Based on review of agency records revealed that 1 of 2 adult participant files (Participant 1) lacked identifying "allergies."</p>	<p>1. What corrective action(s) will be taken? Allergies will be identified in the participant information.                      2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?                      All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.                      3. Who will be responsible for implementing each corrective action?                      The administrator or designee                      4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules?                      The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, during annual redeterminations, and ongoing.</p>	<p>2013-05-15</p>



information: (7-1-11)

d. Profile sheet containing the identifying information reflecting the current status of the participant, including residence and living arrangement, contact information, emergency contacts, physician, current medications, allergies, special dietary or medical needs, and any other information required to provide safe and effective care; (7-1-11)

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.900</p> <p>900. REQUIREMENTS FOR AN AGENCY'S QUALITY ASSURANCE PROGRAM. Each DDA defined under these rules must develop and implement a quality assurance program. (7-1-11)</p>	<p>Review of agency documentation revealed that the agency has not fully implemented its written quality assurance program.</p>	<p>1. What corrective action(s) will be taken? The agency will render training on the written quality assurance program to all employees to include roles and responsibilities. Training will be provided internally and procured externally.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, and ongoing.</p>	<p>2013-05-31</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.900.02.e</p> <p>900. REQUIREMENTS FOR AN AGENCY'S QUALITY ASSURANCE PROGRAM. Each DDA defined under these rules must develop and implement a quality assurance program. (7-1-11)</p> <p>02. Quality Assurance Program Components. Each DDA's written quality assurance program must include: (7-1-11)</p> <p>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>During review of agency records it was noted that the agency was not able to produce documentation of an annual review of the agency's code of ethics.</p>	<p>1. What corrective action(s) will be taken? The agency will document its review of the code of ethics as part of its quality assurance program.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, and ongoing.</p>	<p>2013-05-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.900.02.f</p> <p>900. REQUIREMENTS FOR AN AGENCY'S QUALITY ASSURANCE PROGRAM. Each DDA defined under these rules must develop and implement a quality assurance program. (7-1-11)</p> <p>02. Quality Assurance Program Components. Each DDA's written quality assurance program must include: (7-1-11)</p> <p>f. An annual review of agency's policy and procedure manual to specify date and content of revisions made; and (7-1-11)</p>	<p>During review of agency records it was noted that the agency was not able to produce documentation of an annual review of the agency's policy and procedure manual.</p>	<p>1. What corrective action(s) will be taken? The agency will document its review of its policies and procedures as part of its quality assurance program.</p> <p>2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken? All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.</p> <p>3. Who will be responsible for implementing each corrective action? The administrator or designee</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, and ongoing.</p>	<p>2013-05-15</p>
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.905.03.a</p> <p>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. (7-1-11)</p>	<p>Based on review of agency documents, it was determined that 1 of 2 adult participant records (Participant 2) lacked documentation that the agency ensured that the participant received information regarding his rights.</p>		<p>2013-05-15</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: (7-1-11)

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 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)

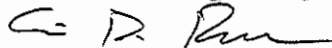
1. What corrective action(s) will be taken?  
The agency will provide a review of the participant rights with the participant and will document the review prior to service provision with all new participants.
2. How will the agency identify participants who may be affected by the deficiency(s)? If participants are identified, what corrective action will be taken?  
All participant services will be reviewed for affects of the deficiencies and the corrective actions described in #1 will be implemented.
3. Who will be responsible for implementing each corrective action?  
The administrator or designee
4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules?  
The corrective actions will monitored in formal quarterly quality assurance reviews, annual employee trainings, and ongoing.

Administrator/Provider Signature:



Date: 5.19.2013

Department POC Approval Signature:



Date: 4/19/13

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