



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

JUDY A. CORDENIZ – ADMINISTRATOR
LICENSING AND CERTIFICATION
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE 208-364-1959
FAX 208-364-1811

June 11, 2012

CERTIFIED MAIL #: 7007 3020 0001 4045 7655

Ellen Hampton, Administrator
HISway, LLC
348 North Orchard Street
Boise, ID 83706

Dear Ms. Hampton:

Thank you for submitting the Plan of Correction for HISway, LLC dated June 2, 2012, in response to the recertification survey conducted by the Department from April 16, 2012, to April 20, 2012. The Department has reviewed and accepted the Plan of Correction. As a result, we have issued HISway, LLC a renewed residential habilitation agency certificate effective from June 7, 2012, to May 31, 2013, unless otherwise suspended or revoked.

This certificate is contingent upon correction of deficiencies cited during the compliance review. Your agency is required to submit documentation to substantiate that your Plan of Correction has been implemented. Please submit these documents in the order of citation listed on the Statement of Deficiencies (NOTE: Please assure that each document submitted as supporting documentation is directly referenced to a citation). Documentation must be submitted within seven days of the date of completion listed on your agency's Plan of Correction and no later than August 3, 2012. You may submit supporting documentation as follows:

- Fax: (208) 364-1811
- E-mail: ALC@dhw.idaho.gov
- Mail: Attn: DD Certification Program
Licensing & Certification - DHW
P.O. Box 83720
Boise, ID 83720-0009
- Deliver: Licensing & Certification -- DHW
3232 Elder Street, Boise, ID 83705

Ellen Hampton, Administrator
June 11, 2012
Page 2 of 2

Pursuant to IDAPA 16.05.03.300, you may request an administrative review to appeal the Department decision affecting the length of your certification. 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. The administrative review request should be addressed to:

**Debby Ransom, Bureau Chief
Licensing & Certification Section
PO Box 83720
Boise, ID 83720-0036
Fax: (208) 336-1811**

Upon receipt of a timely written request, an administrative review conference will be scheduled and conducted in accordance with IDAPA 16.05.03 "Rules Governing Contested Case Proceedings and Declaratory Rulings."

Thank you for your patience while accommodating us through the survey process. If you have any questions, you can reach me at 364-1828.

Sincerely,



FREDÉ TRENKLE-MACALLISTER
Medical Program Specialist
Developmental Disabilities Certification Program

FTM/slm

Enclosures

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

Statement of Deficiencies

Residential Habilitation Agency

HISWay, LLC

RHA-236

348 N Orchard St

Boise, ID 83706

(208) 584-3737

Survey Type: Recertification

Entrance Date: 4/16/2012

Exit Date: 4/20/2012

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

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.c.i 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) 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 be capable of supervising 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: (3-29-12) c. Prior to delivering services to a participant,	Training Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9 and 11 showed lack of training documentation for "purpose and philosophy of service."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will train to ensure the employee understands the application as HISway interprets. 2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented by the Program Coordinator 3.The training will be a combined effort to be conducted by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months. 4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is done by the Program Coordinator documented and filed in an appropriate place for review by the Administrator. 5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

agency direct service staff must complete an orientation program. The orientation program must include the following subjects: (3-29-12)
i. Purpose and philosophy of services; (3-19-07)

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text

16.03.10.705.01.c.ii

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)
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 be capable of supervising 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: (3-29-12)
c. Prior to delivering services to a participant, agency direct service staff must complete an orientation program. The orientation program must include the following subjects: (3-29-12)
ii. Service rules; (3-19-07)

Category/Findings

Training

Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "service rules."

Plan of Correction (POC)

1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will train to ensure the employee understands the application as HISway interprets.
2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented by the Program Coordinator
3.The training will be a combined effort to be conducted by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.
4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is done by the Program Coordinator documented and filed in an appropriate place for review by the Administrator.
5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.c.iii 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) 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 be capable of supervising 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: (3-29-12) c. Prior to delivering services to a participant, agency direct service staff must complete an orientation program. The orientation program must include the following subjects: (3-29-12) iii. Policies and procedures; (3-19-07)	Training Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for ""policies and procedures."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home. 2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented. 3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months. 4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator. 5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.
Scope and Severity:	Pattern / No Actual Harm - Potential for Minimal Harm	Date to be Corrected:
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Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.c.iv 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) 01. Residential Habilitation – Supported Living. When residential habilitation services are	Training Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "Proper conduct in relating to waiver participants."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.

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 be capable of supervising 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: (3-29-12)

c. Prior to delivering services to a participant, agency direct service staff must complete an orientation program. The orientation program must include the following subjects: (3-29-12)

iv. Proper conduct in relating to waiver participants; (3-19-07)

2. Aggressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.

3. The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.

4. HISWay has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.

5. This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.c.v	Training	
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) 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 be capable of supervising the direct services provided. Individuals who provide residential habilitation services in the	Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "handling of confidential and emergency situation that involve the participant."	1. Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will train to ensure the employee understands the application as HISWay interprets. 2. Aggressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented by the Program Coordinator 3. The training will be a combined effort to be conducted by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.

home of the participant (supported living) must be employed by a Residential Habilitation Agency. Providers of residential habilitation services must meet the following requirements: (3-29-12)

c. Prior to delivering services to a participant, agency direct service staff must complete an orientation program. The orientation program must include the following subjects: (3-29-12)

v. Handling of confidential and emergency situations that involve the waiver participant; (3-19-07)

4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.

5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.03.10.705.01.d.i</p> <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 be capable of supervising 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: (3-29-12)</p> <p>d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and</p>	<p>Training</p> <p>Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "instructional techniques."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>

include at a minimum: (3-29-12)
i. Instructional techniques: Methodologies for training in a systematic and effective manner; (3-19-07)

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.03.10.705.01.d.ii</p> <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 be capable of supervising 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: (3-29-12)</p> <p>d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum: (3-29-12)</p> <p>ii. Managing behaviors: Techniques and strategies for teaching adaptive behaviors; (3-19-07)</p>	<p>Training</p> <p>Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "managing behaviors."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>
Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm		<p>Date to be Corrected:</p> <p>Administrator Initials:</p>

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.d.iii 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) 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 be capable of supervising 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: (3-29-12) d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum: (3-29-12) iii. Feeding; (3-19-07)	Training Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "feeding."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home. 2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented. 3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months. 4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator. 5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

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16.03.10.705.01.d.iv 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)	Training Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "communication."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by

<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 be capable of supervising 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: (3-29-12)</p> <p>d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum: (3-29-12)</p> <p>iv. Communication; (3-19-07)</p>		<p>he Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>
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Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

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Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.03.10.705.01.d.ix</p> <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, "</p>	<p>Training</p> <p>Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "maintenance of a clean, safe and healthy environment."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p>

Rules Governing Residential Habilitation Agencies," and must be capable of supervising 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: (3-29-12)

d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum: (3-29-12)

ix. Maintenance of a clean, safe, and healthy environment. (3-19-07)

3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.

4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.

5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

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Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.d.v	Training	
<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 be capable of supervising 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</p>	<p>Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "mobility."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p>

services must meet the following requirements: (3-29-12)
 d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum: (3-29-12)
 v. Mobility; (3-19-07)

4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.
 5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

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Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.03.10.705.01.d.vi</p> <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 be capable of supervising 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: (3-29-12) d. Additional training requirements must be completed within six (6) months of employment</p>	<p>Training</p> <p>Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for "activities of daily living."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home. 2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented. 3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months. 4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator. 5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>

with the residential habilitation agency and include at a minimum: (3-29-12)
vi. Activities of daily living; (3-19-07)

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Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.03.10.705.01.d.viii</p> <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 be capable of supervising 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: (3-29-12)</p> <p>d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum: (3-29-12)</p> <p>viii. Housekeeping techniques; and (3-19-07)</p>	<p>Training</p> <p>Review of agency personnel files revealed Employees #1, 2, 5, 7, 9, and 11 showed lack of training documentation for “housekeeping techniques.”</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.03.10.705.01.e 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) 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 be capable of supervising 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: (3-29-12) e. The provider agency will be responsible for providing on-going training specific to the needs of the participant as needed. (3-19-07)	Training Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "ongoing training to meet the needs of the participant."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home. 2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented. 3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months. 4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator. 5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.203.01 203. 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	Training Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "rights."	1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by

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: (8-5-11)T
01. Rights. Personal, civil, and human rights. (7-1-95)

application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.
2. Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.
3. The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.
4. HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.
5. This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.203.02	Training	
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: (8-5-11)T 02. Disabilities. Developmental disabilities	Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "working with individuals with a developmental disability."	1. Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home. 2. Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented. 3. The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.

commensurate with the skills of participants served. (3-20-04)

4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.

5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.203.03	Training	
<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 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: (8-5-11)T</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>Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "understanding of participant's specific needs."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm**Date to be Corrected:****Administrator Initials:**

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.04.17.203.04</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: (8-5-11)T 04. Supervision. Appropriate methods of supervision. (7-1-95)</p>	<p>Training</p> <p>Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "methods of supervising participants."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm**Date to be Corrected:****Administrator Initials:**

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.203.05	Training	
<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 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: (8-5-11)T</p> <p>05. Review of Services. A review of the specific services that the participant requires. (3-20-04)</p>	<p>Review of agency personnel files revealed Employees #1, 2, 5, 6, 7, 9, and 11 showed lack of training documentation for "review of services."</p>	<p>1.Going forward all orientations will include detailed presentation and discussion concerning the purpose and philosophy of service offered to our Participants. The follow through will be on site in the home where the Program Coordinator will ensure the employee understands the application as HISway interprets. Training in the home will be by the Program Coordinator concerning the individual needs of the Participants in that home.</p> <p>2.Agressive training of all personnel is in place for over the next six months. Refresher trainings both in House Meetings and on site will be given and documented.</p> <p>3.The training will be a combined effort to be directed by the Program Coordinators and supported by House Managers. The goal is to have documented training for every staff within the next six months.</p> <p>4.HISway has been made aware of the inconsistency in documentation of training. Policy is now in place to assure that all training is documented and filed in an appropriate place for review by the Administrator.</p> <p>5.This Policy and its implementation is happening now and is expected to be completed by July 1, 2012. Each Employee will have a record of ongoing training in their Personnel file.</p>

Scope and Severity: Pattern / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.203.06	Training	
<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 706. Training is to be a part of the orientation training and is required</p>	<p>Review of agency personnel files revealed Employee #9 showed a lack of training documentation for current First Aid certification.</p>	<p>1.All Personnel files have been reviewed. This action took place during Survey. Employees were identified that needed updated information and training. Administration established an active check off list to identify each employee and the training documented.</p> <p>2.Review of all Personnel files has established the necessary updated documentation needed.</p>

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: (8-5-11)T
 06. First Aid and CPR. First aid, CPR, and universal precautions. (7-1-95)

3.The Administrator will keep the active document for weekly review.
 4.Weekly review will establish the need to update certifications and licensing in line with IDAPA rule and HISway Policy.
 5.The active document has been in place since Survey and weekly monitoring is keeping documentation and certifications current.

Scope and Severity: Isolated / No Actual Harm - Potential for More Than Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.301.03.j	Criminal History	
301. PERSONNEL. 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: (8-5-11)T j. Verification of satisfactory completion of criminal history checks in accordance with IDAPA 16.05.06, "Criminal History and Background Checks"; and (3-20-04)	Review of agency personnel files revealed Employee #5 showed lack of documentation for a Criminal History Check.	1.Review of all Personnel files identified and error in the procedure HISway was doing background checks. Hiring procedure has been changed to conform to regulation. 2.All Personnel files have been reviewed. Those that required renewal of fingerprinting are in process. 3.Administration will monitor proper procedure. Employees will not be hired without immediate background information. 4.Administration will monitor. 5.All background information will be up to code by May 31, 2012

Scope and Severity: Isolated / No Actual Harm - Potential for More Than Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.04.17.302.01.b</p> <p>302.SERVICE PROVISION PROCEDURES.</p> <p>01. Admission Procedures. The following criteria must apply to all participants receiving services from a residential habilitation agency: (3-20-04)</p> <p>b. The agency must obtain authorization from the Department for reimbursement for each Medicaidcovered eligible waiver service prior to providing residential habilitation services in accordance with IDAPA16.03.10, "Medicaid Enhanced Plan Benefits," Sections 507 through 515 (3-20-04)</p>	<p>Record Requirements</p> <p>Review of agency documentation revealed the file for Participant #4 lacked a written plan authorized by the department.</p>	<p>1.Review of all Participant files have been a part of this citation. HISway will follow-up with the Target Service Coordinators to ask for a copy of the ISP for the Permanent File.</p> <p>2. All Participant files have been reviewed and now include the ISP.</p> <p>3.Program Coordinators are now training from the ISP in the home of Participants. They will need them to effectively do their jobs. Administration will follow-up for completion.</p> <p>4.Program Coordinators are in each home once a week. They report to Administration.</p> <p>5. This citation was corrected right away and the specific documentation of active training will document that plans are in place.</p>

Scope and Severity: Isolated / No Actual Harm - Potential for Minimal Harm		Date to be Corrected:	Administrator Initials:
Rule Reference/Text	Category/Findings	Plan of Correction (POC)	
16.04.17.302.03 302. SERVICE PROVISION PROCEDURES. 03. Periodic Review. Review of services and participant satisfaction must be conducted at least quarterly or more often if required by the participant's condition or program. (3-20-04)	Record Requirements Review of agency documentation revealed the file for Participant #3 lacked records of a review of services for the 1st quarter of 2012.	<p>1. Quality Assurance reviews are filed in the office the first week after the Quarter ends. The Program Coordinator is certain the missing review was completed. A new review was done the end of April and is now in file.</p> <p>2. All other reviews were and are in place.</p> <p>3. A check off list for monthly and quarterly filing is now in place to assure all reviews and reports are in the proper place.</p> <p>4. The check off list will be monitored by the Administrator.</p> <p>5. This corrective action was in place May 1, 2012.</p>	
Scope and Severity: Isolated / No Actual Harm - Potential for Minimal Harm		Date to be Corrected:	Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.400.02.i 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) i. Results of an age appropriate functional assessment, and person centered plan. (7-1-95)	Assessments Review of agency documentation revealed all participants reviewed (Participants #1, 2, 3, and 4) lacked a Functional Assessment.	1.All Participants Permanent files now have functional assessments and person centered plans. 2.Review of all Participant files has been finished. Documentation to complete each record in complete. 3.Administration has identified the needed documentation. Program Coordinators and Target Service Coordinators have supplied the documentation necessary. 4.The "Master Check Off" list will give ongoing information to avoid missing needed documentation. 5.Corrective action has been taken as of this date and the on going monitoring will avoid any further problems.

Scope and Severity: Widespread / No Actual Harm - Potential for Minimal Harm

Date to be Corrected:

Administrator Initials:

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
16.04.17.400.02.k 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) k. Habilitation program, including documentation of planning, continuous evaluation, and participant satisfaction with the program.	Record Requirements Review of agency documentation revealed all participant files reviewed (Participants #1, 2, 3, and 4) lacked documentation of planning and continuous evaluation.	1.The six month status review is posted every month by the Program Coordinator. The posting will be done the first week of the following month and be available for review by the Administrator.

(3-20-04)		<p>2.Status Reviews were and are on going for every Participant. However the time they are due was not established.</p> <p>3.Program Coordinators will now have the report available on all Participants by the end of the first week of the month following data collection.</p> <p>4.The monthly documentation check off list will identify the need for updated Status Reviews.</p> <p>5.All status reviews are up to date now.</p>
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Scope and Severity: Widespread / No Actual Harm - Potential for Minimal Harm **Date to be Corrected:** **Administrator Initials:**

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>16.04.17.404.01</p> <p>404. COMMUNICATION WITH PARTICIPANTS, PARENTS, LEGAL GUARDIANS, AND OTHERS. The residential habilitation agency must promote participation of participants, legal guardians, relatives and friends in the process of providing services to a participant unless their participation is unobtainable or inappropriate as prescribed by the plan of service; and (3-20-04) 01. Reciprocal Communication. Answer communications from participant's families and friends promptly and appropriately; and (3-20-04)</p>	<p>Communication</p> <p>Review of agency documentation revealed Participant #1's guardian was notified on only 1 out of 5 significant incidents.</p> <p>For Participants #2, 3, and 4, files lacked documentation that the guardian was notified of any significant incidents.</p>	<p>1.The incident accident form used provides for documenting contact with parents or guardians. Training has been given and is on going for proper reporting of incident accidents.</p> <p>2.It is Policy that the Administrator be contacted for all incidents and accidents. Training on this Policy has been done and is on going.</p> <p>3.Program Coordinators are training and Administration is monitoring.</p> <p>4.Incident Accident reports must be in the office within 24 hours. Administration - although already having been advised by telephone - reviews the report for accuracy and completeness.</p> <p>5.Reports are completed at the time of the event and turned into the office within 24 hours.</p>

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Scope and Severity: Widespread / No Actual Harm - Potential for Minimal Harm **Date to be Corrected:** **Administrator Initials:**

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<p>Additional Terms A-05.10</p> <p>A-5. Quality Improvement. The Provider is responsible for the development and implementation of a quality assurance program which assures service delivery consistent with applicable rules. Results of individual quality improvement reviews conducted by the Department shall be transmitted to the Provider within forty-five (45) days of a review being completed. If deficiencies have been identified by the review, the Provider shall submit to the Department a corrective action plan for addressing the identified deficiencies. This corrective action plan shall be submitted to the Department within forty-five (45) days of receiving the results of a quality assurance review. Upon request, a provider shall also forward to the Department the results of any implemented corrective action plan. At a minimum, quality of services shall be evaluated according to the following criteria: A-05.10 The Provider discusses the implementation plan(s) with the participant and provides him /her a copy of each plan.</p>	<p>Record Requirements</p> <p>Review of agency documents revealed that all of the participant files reviewed (Participants #1, 2, 3, and 4) lacked documentation that the provider discussed the implementation plan(s) with the participants and provided them with a copy.</p> <p>(REPEAT DEFICIENCY)</p>	<p>1.All Participant books in the home have a copy of the ISP in a slickerfolder. In that same slickeris the signed acknowledgement of the plan by the Participant.</p> <p>2.It has never been HISway Policy to have the ISP in the home. Recognizing the rule and HISway's commitment to do it right, we now have the ISP in every Participant file in the home.</p> <p>3.Administration initiated the action and Program Coordinators have followed through with the action.</p> <p>4.Program Coordinators will replace ISP at the annual review. The check off list will reflect completion.</p> <p>5.It is done.</p>

Residential Habitation Agency	HISWay, LLC	4/20/2012
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Scope and Severity: Widespread / No Actual Harm - Potential for Minimal Harm	Date to be Corrected	Administrator Initials: <i>et</i>
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Administrator Signature (Confirms submission of POE): <i>Edwin Houston</i>	Date: June 2, 2012
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Team Leader Signature (Signifies acceptance of POE): <i>Frank Jumbly-Maulkista</i>	Date: 6/7/12
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