# IDAHO DEPARTMENT OF HEALTH & WELFARE

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September 7, 2012

Tom Moss, Administrator
Jeff Frick, Program Manager
Aspire Human Services
615 2nd Avenue West
Wendell, Idaho 83355

Dear Mr. Moss & Mr. Frick:

Thank you for submitting Aspire Human Services Plan of Correction for Residential Habilitation services dated August 10, 2012. The Department has reviewed and accepted the Plan of Correction in response to the Department's Compliance Review findings. As a result, we have issued Aspire Human Services a full certificate effective September 1, 2012 through August 31, 2015 unless otherwise suspended or revoked.

According to IDAPA 16.04.17.501.02, this certificate is contingent upon the correction of deficiencies. The supporting documentation addressed in your plan of correction will be reviewed during your next survey. Please ensure your agency quality assurance processes continue to implement and monitor rule compliance.

Thank you for your assistance through the survey process.

Sincerely,

Pam Loveland-Schmidt

Pam Loveland-Schmidt, Adult & Child DS
Medical Program Specialist
Licensing and Certification
208-239-6267
lovelanp@dhw.idaho.gov

Enclosure

IDAHO DEPARTMENT OF
HEALTH & WELFARE

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# Statement of Deficiencies

*Residential Habilitation Agency*

Aspire Human Services LLC -- Wendell
RHA-4077

615 2nd Ave W
Wendell, ID 83355-
(208) 855-9142

**Survey Type:** Initial

**Entrance Date:** 7/16/2012

**Exit Date:** 7/16/2012

**Initial Comments:** Surveyors Present: Pam Loveland-Schmidt, Medical Program Specialist, Licensing & Certification; and Frede' Trenkle-MacAllister.

| Rule Reference/Text | Findings | Plan of Correction | Date to be Corrected |
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| 16.04.17.203<br>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.<br>Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706. Training is to be a part of the orientation training and is required initially prior to accepting participants. All required training must be completed within six (6) months of employment with a residential habilitation agency and documented in the employee residential habilitation provider record. The agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12) | Two of four employee records reviewed (Employees 3 and 4) lacked documentation that the agency ensured all employees and contractors received orientation training per rule requirements.<br><br>For example:<br><br>Employee 4's record lacked documentation of training prior to delivering services for "Service Rules."<br><br>Also, see IDAPA 16.03.10.705.01.c.ii.<br><br>Employee 3 and 4's records lacked documentation of training prior to delivering services for "working with individuals with developmental disabilities."<br><br>Also, see IDAPA 16.03.10.705.01.c.viii.<br><br>Employees 3 and 4's records lacked | 1. Aspire Human Services – Preferred Community Homes has created and implemented a revised orientation checklist which includes all of the requirements including:<br>a. Service Rules<br>b. Working with Individual with Developmental Disabilities<br>c. Training on Disabilities<br>d. Feeding<br>e. Communication<br>f. Basic understanding of needs desires goals and objectives of participant served<br>g. Methods of supervision<br>2. Aspire Human Services – Preferred Community Homes has implemented the revised checklist and is currently providing the required training to all new hire employees. In addition, all current staff is receiving the training from the revised checklist. | 2012-08-31 |

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| | documentation of receiving training within six (6) months of employment for "instructional techniques."<br><br>Also, see IDAPA 16.03.10.705.01.d.i.<br><br>Employee 4's record lacked documentation of receiving training within six (6) months of employment for "feeding."<br><br>Also, see IDAPA 16.03.10.705.01.d.iii.<br><br>Employee 4's record lacked documentation of receiving training within six (6) months of employment for "communication."<br><br>Also, see IDAPA 16.03.10.705.01.d.iv.<br><br>Employee 4's record lacked documentation of receiving training within six (6) months of employment for "body mechanics and lifting techniques."<br><br>Also, see IDAPA 16.03.10.705.01.d.vii. | 3. The Administrator will be responsible to assure that all current staff receives the training from the revised checklist. For new hire employees the HR Director will be responsible for assuring that the revised Orientation Checklist is completed before staff begins working with the individuals.<br>4. For future new hire employees the HR Director will review each staff's orientation packet to assure they have received all trainings prior to working with the individuals. | |
| **Rule Reference/Text** | **Findings** | **Plan of Correction** | **Date to be Corrected** |
| 16.04.17.203.02<br><br>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.<br>Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706. Training is to be a part of the orientation training and is required initially prior to accepting participants. All required training must be completed within six (6) months of employment with a residential habilitation agency and documented in the employee residential habilitation provider record. The agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12) | Four of four employee records reviewed (Employees 1, 2, 3, and 4) lacked documentation of training per rule requirements.<br><br>For example, Employees 1, 2, 3, and 4's records lacked documentation of receiving training for developmental disabilities commensurate with the skills of participants served. | 1. Aspire Human Services – Preferred Community Homes has created and implemented a revised orientation checklist which includes all of the requirements including:<br>a. developmental disabilities commensurate with the skills of participants served.<br>2. Aspire Human Services – Preferred Community Homes has implemented the revised checklist and is currently providing the required training to all new hire employees. In addition, all current staff is receiving the training from the revised checklist.<br>3. The Administrator will be responsible to assure that all current staff receives the training from the revised checklist. For new hire employees the HR Director will be responsible for assuring that the | 2012-08-31 |

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| 02. Disabilities. Developmental disabilities commensurate with the skills of participants served. (3-20-04) | | revised Orientation Checklist is completed before staff begins working with the individuals.<br>4. For future new hire employees the HR Director will review each staff's orientation packet to assure they have received all trainings prior to working with the individuals. | |
| **Rule Reference/Text** | **Findings** | **Plan of Correction** | **Date to be Corrected** |
| 16.04.17.203.03<br>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.<br>Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706. Training is to be a part of the orientation training and is required initially prior to accepting participants. All required training must be completed within six (6) months of employment with a residential habilitation agency and documented in the employee residential habilitation provider record. The agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12)<br>03. Understanding of Participants' Needs. A basic understanding of the needs, desires, goals and objectives of participants served. (3-20-04) | One of four employee records reviewed (Employee 4) lacked documentation of rule-compliant training.<br><br>For example, Employee 4's record lacked documentation of training for a basic understanding of the needs, desires, goals and objectives of participants served. | 1. Aspire Human Services – Preferred Community Homes has created and implemented a revised orientation checklist which includes all of the requirements including:<br>a. Service Rules<br>b. Working with Individual with Developmental Disabilities<br>c. Training on Disabilities<br>d. Feeding<br>e. Communication<br>f. Basic understanding of needs desires goals and objectives of participant served<br>g. Methods of supervision<br>2. Aspire Human Services – Preferred Community Homes has implemented the revised checklist and is currently providing the required training to all new hire employees. In addition, all current staff is receiving the training from the revised checklist.<br>3. The Administrator will be responsible to assure that all current staff receives the training from the revised checklist. For new hire employees the HR Director will be responsible for assuring that the revised Orientation Checklist is completed before staff begins working with the individuals. | 2012-08-31 |

| Rule Reference/Text | Findings | Plan of Correction | Date to be Corrected |
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| 16.04.17.203.04<br>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.<br>Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706. Training is to be a part of the orientation training and is required initially prior to accepting participants. All required training must be completed within six (6) months of employment with a residential habilitation agency and documented in the employee residential habilitation provider record. The agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12)<br>04. Supervision. Appropriate methods of supervision. (7-1-95) | Four of four employee records reviewed (Employees 1, 2, 3, and 4) lacked documentation of rule-compliant training.<br><br>For example, Employees 1, 2, 3, and 4's records lacked documenation of appropriate methods of supervision training. | 4. For future new hire employees the HR Director will review each staff's orientation packet to assure they have received all trainings prior to working with the individuals. | |

| Rule Reference/Text | Findings | Plan of Correction | Date to be Corrected |
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| 16.04.17.301.03.k<br>301. PERSONNEL.<br>03. Personnel Records. A record for each employee must be maintained from date of hire for not less than one (1) year after the employee is no longer employed by the agency, and must include at least the following: (3-29-12)<br>k. Evidence that the employee has received a job description and understands his duties. (3-29-12) | One of four employee records reviewed (Employee 1) lacked evidence that the employee had received a job description and understood her duties.<br><br>For example, Employee 1's record lacked documentation that she had received a job description and understood her duties. | 1. Aspire Human Services – Preferred Community Homes has created and implemented a revised orientation checklist which includes all of the requirements including:<br>a. Having a signed job description in their file before beginning work with the individuals.<br>2. Aspire Human Services – Preferred Community Homes has implemented the revised checklist and is currently providing the required training to all new hire employees. | 2012-08-31 |

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| | | . In addition, all files are currently being reviewed to assure that there is a signed job description and staff understand their responsibilities.<br>3. The Administrator will be responsible to assure that all current staff receives the training from the revised checklist. For new hire employees the HR Director will be responsible for assuring that the revised Orientation Checklist is completed before staff begins working with the individuals.<br>4. For future new hire employees the HR Director will review each staff's orientation packet to assure they have received all trainings prior to working with the individuals. | |
| **Rule Reference/Text** | **Findings** | **Plan of Correction** | **Date to be Corrected** |
| 16.04.17.302.02<br>302. SERVICE PROVISION PROCEDURES.<br>02. Implementation Plan. Each participant must have an implementation plan that includes goals and objectives specific to his plan of service residential habilitation program. (3-20-04) | Two of two participant records reviewed (Participants 1 and 2) lacked documentation of rule-compliant Program Implementation Plans (PIPs).<br><br>For example:<br><br>Participant 1's Provider Status Review (PSR) had "n.d" (no data), and then 100% for many months. The data then dropped to 7%, etc.<br><br>Participant 2's PSR was the same as Participant 1 above.<br><br>Also, see IDAPA 16.04.17.010.22. Implementation Plan. Written documentation of participants' needs, desires, goals and measurable objectives, including documentation of planning, ongoing evaluation, data-based progress and participant satisfaction of the program developed, implemented, and provided by the agency specific to the plan of service. | 1. & 2 The Provider status Reviews have been reviewed and updated for all of the individuals served to include written documentation of the goals and measurable objectives, including documentation of planning, ongoing evaluation, data-based progress and participant satisfaction of the program.<br>3. The Program Administrator will be responsible to monitor the Provider Status Reviews and Participant Satisfaction activities.<br>4. Each month the Program Administrator will be responsible to submit written Quality Assurance forms to the Regional Director to document that the activities are completed. | 2012-08-31 |

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| | IDAPA 16.04.17.011.16.<br>Progress Note. A statement which specifically describes the skill to be acquired or service/support to be provided, includes quantifiable criteria for determining progress towards and attainment of the service, support or skill, and identifies a projected date of attainment. | | |
| **Rule Reference/Text** | **Findings** | **Plan of Correction** | **Date to be Corrected** |
| 16.04.17.302.03<br>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) | Two of two participant records reviewed (Participants 1 and 2) lacked documentation that a review of services and participant satisfaction was conducted at least quarterly or more often if required by the participant's condition or program.<br><br>For example:<br><br>Participant 1's record lacked documentation of quarterly review. The record included reviews dated December 30, 2011; May 8, 2012; and July 6, 2012; but lacked documentation for the 1st quarter (January 2012 - March 2012).<br><br>Participant 2's record included a review dated December 30, 2011, signed by the Program Coordinator. There was no documentation of another review until July 6, 2012. The record lacked 2 quarters of review documentation (January 2012 - March 2012 and April 2012 - June 2012). | 1. & 2 The Provider status Reviews have been reviewed and updated for all of the individuals served to include written documentation of the goals and measurable objectives, including documentation of planning, ongoing evaluation, data-based progress and participant satisfaction of the program.<br>3. The Program Administrator will be responsible to monitor the Provider Status Reviews and Participant Satisfaction activities.<br>4. Each month the Program Administrator will be responsible to submit written Quality Assurance forms to the Regional Director to document that the activities are completed. | 2012-08-31 |

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| **Administrator/Provider Signature:** | Tom Moss | **Date:** 8/10/12 |
| **Department POC Approval Signature:** | Pam Loveland-Schmidt | **Date:** 9/7/12 |

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