IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

DIVISION OF LICENSING & CERTIFICATION
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September 7, 2012

Hope Brackett, Administrator
Addus Healthcare Inc. dba A Full Life Agency Inc.
1034 Main Street
Lewiston, ID 83501

Dear Ms. Brackett:

Thank you for submitting the Plan of Correction for Addus Healthcare Inc. dba A Full Life Agency Inc. dated September 6, 2012, in response to the Residential Habilitation Agency compliance review conducted by the Department on August 1, 2012. The Department has reviewed and accepted the Plan of Correction.

As a result, we have issued Addus Healthcare Inc. dba A Full Life Agency Inc. a full certificate effective from July 10, 2012, through July 31, 2012, unless otherwise suspended or revoked. This certificate is contingent upon correction of deficiencies cited during the compliance review.

Thank you for your patience while accommodating us through the survey process. If you have any questions, you can reach me at (208) 364-1828.

Sincerely,

Frede' Trenkle-MacAllister

FREDÉ TRENKLE-MACALLISTER
Medical Program Specialist
DDA/ResHab Certification Program

FTM

Enclosures
1. Renewed Residential Habilitation Certificates
2. Approved Plan of Correction

IDAHO DEPARTMENT OF
HEALTH & WELFARE

Submit by Email | Print Form

Statement of Deficiencies

Residential Habilitation Agency

Addus Healthcare Inc dba A Full Life Agency, Inc.
RHA-354

1034 Main St
Lewiston, ID 83501
(208) 746-8881

Survey Type: Recertification

Entrance Date: 8/1/2012

Exit Date: 8/1/2012

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

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.04.17.302.02 302. SERVICE PROVISION PROCEDURES. 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)	Based on review of the agency's documentation, it was determined that 1 of 2 participant files (Participant 2) lacked an implemenation plan that included goals and objectives specific to the plan of service. On Participant 2's plan of service, it stated, "Learn home safety skills." The implementation plan lacked a goal addressing this skill. Also, there was an implementation plan for social interaction; this goal was not listed on the plan of service.	The plan developer will review all current plans to ensure that all goals on the ISP are addressed in the Implementation plan. If the Plan Developer determines that a specific goal is in the best interest and pertinent to the participant's care and needs to be added to the ISP he/she will complete the necessary documentation on why the goal is needed and will maintain the documentation in the participants file. The Agency Director will review all Implementation Plans when they are completed to ensure that the goals are addressed and all necessary documentation is completed in accordance with Idaho State Regulations.	9-30-12

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
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)	Based on review of the agency's records, it was determined that 1 of 2 participant files (Participant 2) lacked an age-appropriate functional assessment.	The Agency Director has requested the release of a complete SIB-R from the State Assessor. The Agency Director was informed by the State Assessors that they would only release the summary; Therefore, the Plan Developer will research the internet for Functional Assessment tools available to determine which tool will be best utilized at our agency and meet his/her requirements for plan development. The Agency Director will review all participant files to ensure the proper completion of the functional assessment. If a functional assessment cannot be located the Agency Director will notify the Plan Developer and direct the completion of a new assessment. The functional assessments was not independently completed by our agency because the Plan Developer felt she could adequately develop an Implementation plan with the information provided by the State Assessors' s SIB-R summary. Going forward, the Agency Director will thoroughly check each participant file upon initiation of service and all subsequent redeterminations to ensure that a assessment is in place.	10-15-12

Administrator/Provider Signature: Hope Brackett **Date:** 9-6-12

Department POC Approval Signature: Fruli Frenkel-MacAllister **Date:** 9/6/2012

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