IDAHO DEPARTMENT OF
HEALTH & WELFARE

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November 21, 2012

Eugene McHugh, Administrator
R & T Agency, Inc.
2707 Highway 95 North
Cottonwood, ID 83522

Dear Mr. McHugh:

Thank you for submitting the Plan of Correction (POC) for R & T Agency, Inc. dated November 21, 2012, in response to the Residential Habilitation Agency recertification survey conducted by the Department on November 8, 2012. The Department has reviewed and accepted the POC.

As a result of the accepting the POC, we have issued R & T Agency, Inc. a full certificate effective from December 1, 2012, through November 30, 2015, 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,

Fredé Trenkle-MacAllister

FREDÉ TRENKLE-MACALLISTER
Medical Program Specialist
DDA/RH Certification Program
trenklef@dhw.idaho.gov

FTM/slm

Enclosures
1. Renewed Three-year Residential Habilitation Agency Certificate
2. Approved Plan of Correction

IDAHO DEPARTMENT OF
HEALTH & WELFARE

Statement of Deficiencies

Residential Habilitation Agency

R & T Agency, Inc.
RHA-203

2707 Highway 95 N
Cottonwood, ID 83522-
(208) 962-5170

Survey Type: Recertification

Entrance Date: 11/8/2012

Exit Date: 11/8/2012

Initial Comments: Survey Team: Fredé Trenkle-MacAllister, Medical Program Specialist, Licensing and Certification; and Pam Loveland-Schmidt, Medical Program Specialist, Licensing and Certification.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.04.17.203 203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING. Training must include orientation and ongoing training at a minimum as required under IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits," Sections 700 through 706. Training is to be a part of the orientation training and is required initially prior to accepting participants. All required training must be completed within six (6) months of employment with a residential habilitation agency and documented in the employee residential habilitation provider record. The agency must ensure that all employees and contractors receive orientation training in the following areas: (3-29-12)	Review of agency's personnel files revealed that 4 of 7 direct care providers (Employees 1, 2, 4, and 5) lacked skill training conducted by a QIDP which is required in 16.03.10 "Medicaid Enhanced Plan Benefits" Section 705.	Q# are the five questions for each Finding. Q1. The identified training for the providers was conducted on November 19, 2012 by employee 3 a QIDP. Q2. Through an Agency's review of participant records. Needed corrective action will follow Q4. Q3. The Agency's QIDP. Q4. Training is reviewed quarterly during the Agency's staff meeting. Corrective action will be noted, and staff responsible for the corrective action will be recorded in the meeting notes. A follow-up will be conducted at the next meeting. Q5. November 19, 2012.	2012-11-19

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.04.17.301.03 301. 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: (3-29-12)	Review of agency personnel files revealed that 1 of 9 employee records (Employee 1) indicated that the agency did not maintain employee records from date of hire. Employee 1's file lacked proof of previous CPR/First Aid Certification.	Q1. Employee 1 previous CPR/1st Aid Card was miss-filed in a general archive file. The miss-filled records have been returned to each individual employee file to be retained intact in their respective files.. Q2. Through an Agency's review of participant records. Needed corrective action will follow Q4. Q3. The Agency's Administrator. Q4. Card expiration is the 1st Agenda item on the monthly staff meetings. Q5. November 19, 2012.	2012-11-19

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.04.17.301.03.i 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: (3-29-12) i. Evidence of current CPR and First Aid certifications; and (7-1-95)	Review of agency personnel files revealed that 2 of 8 employees providing Residential Habilitation services (Employees 1 and 3) lacked evidence of current CPR and First Aid certification. Employee 1's personnel file did not have the previous certification. The administrator stated that they did not have the previous card in their possession and that the agency knows that there was at least a 1 month gap before she was certified. Employee 3 had both cards and showed over a 2 month gap in certification.	Q1. Employee 1 previous CPR/1st Aid card has been returned to the employee's file. Reference Finding No. 2. CPR/1st Aid certification will be monitored at each monthly staff meeting as the first agenda item. Form 301.03 CPR/1st Aid expiration dates will be included in each staff meeting. Q2. Through an Agency's review of participant records. Needed corrective action will follow Q4. Q3. The Agency's Administrator. Q4. During the monthly staff meetings. Q5. November 19, 2012.	2012-11-19

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.04.17.301.03.j 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: (3-29-12) 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 records revealed that 1 of 9 employees (Employee 7) lacked a valid criminal history clearance. The clearance letter was not attached to this agency, there was no verification of transfer, and the employee does not show up on the criminal history unit's record for this agency.	Q1. Employee 7 submitted an application for the Criminal History Background Check on November 19, 2012. The appointment date is November 27, 2012. Q2. Through an Agency's review of participant records. Needed corrective action will follow Q4. Q3. The Agency's Administrator. Q4. During the annual review of the participant's records/file by the staff. Q5. November 27, 2012.	2012-11-27

Administrator/Provider Signature: Eugene McHugh **Date:** 2012-11-20

Department POC Approval Signature: Fredi Trimble-MacAllister **Date:** 11/20/12

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

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