



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

TAMARA PRISOCK – ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE (208) 364-1959
FAX (208) 287-1164

April 29, 2013

Evangeline Beechler, BFA, DS, Administrator
Access Behavioral Health Services, Inc.
1276 River Street, Suite 100
Boise, ID 83702

Dear Ms. Beechler:

Thank you for submitting the Plan of Correction for Access Behavioral Health Services, Inc. dated April 23, 2013, in response to the recertification survey concluded on March 27, 2013. The Department has reviewed and accepted the Plan of Correction.

As a result, we have issued Access Behavioral Health Services, Inc. a full certificate effective from May 7, 2013, through April 30, 2016, unless otherwise suspended or revoked. Per IDAPA 16.03.21.125, this certificate is issued on the basis of substantial compliance and is contingent upon the correction of deficiencies.

Thank you for your patience and accommodating us through the survey process. If you have any questions, you can reach me at 364-1906.

Sincerely,

ERIC D. BROWN
Supervisor
DDA/ResHab Certification Program

EDB/slm

Enclosures

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



Statement of Deficiencies

Developmental Disabilities Agency

Access Behavioral Health Services, Inc.
4ACCBHSVC122

1276 River St Ste 100
Boise, ID 83702
(208) 338-4699

Survey Type: Recertification

Entrance Date: 3/26/2013

Exit Date: 3/27/2013

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

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.651.02</p> <p>851. DDA SERVICES: COVERAGE REQUIREMENTS AND LIMITATIONS. Developmental disabilities agency services must be recommended by a physician or other practitioner of the healing arts. The following therapy services are reimbursable when provided in accordance with these rules. (7-1-11)</p> <p>02. Requirements to Deliver Developmental Therapy. Developmental therapy may be delivered in a developmental disabilities agency center-based program, the community, or the home of the participant. Participants living in a certified family home must not receive home-based developmental therapy in a certified family home. Developmental therapy includes individual developmental therapy and group developmental therapy. Developmental therapy services must be delivered by Developmental Specialists or</p>	<p>Based on review of agency documents, it was determined that 1 of 2 adult participants (Participant 1) received home-based developmental therapy in a certified family home.</p>	<ol style="list-style-type: none"> 1. What corrective action(s) will be taken? All staff will be re-trained to specific locations where services can be conducted depending on the participant's living situation. 2. How will the agency identify participants who may be affected by the deficiency(s)? We will audit the adult charts to check for to make sure we are in compliance. If participants are identified, what corrective action will be taken? Staff will be receive individual training. 3. Who will be responsible for implementing each corrective action? The DDA Clinical Supervisor. 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? During our quarterly QA of participants charts. 5. By what date will the corrective action be completed? June 30, 2013. 	

paraprofessionals qualified in accordance with these rules, based on a comprehensive developmental assessment completed prior to the delivery of developmental therapy. (7-1-12)T

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.664.01.a.v</p> <p>664. CHILDREN'S HCBS STATE PLAN OPTION: PROCEDURAL REQUIREMENTS. 01. General Requirements for Program Documentation. The provider must maintain records for each participant served. Each participant's record must include documentation of the participant's involvement in and response to the services provided. For each participant, the following program documentation is required: (7-1-11)</p> <p>a. Direct service provider information that includes written documentation of the service provided during each visit made to the participant, and contains, at a minimum, the following information: (7-1-11)</p> <p>v. Specific place of service. (7-1-11)</p>	<p>Based on review of agency records, it was determined that 1 of 2 child participants' written documentation of the service provided during each visit lacked a specific place of service.</p> <p>For example, Participant B's data forms stated "C" for community and lacked a specific place of service.</p>	<ol style="list-style-type: none"> 1. What corrective action(s) will be taken? All data collection forms will be changed to include specific location of service. All staff will be trained on how to correctly fill out data collection forms. 2. How will the agency identify participants who may be affected by the deficiency(s)? All participants are affected and all data collection forms will be change. If participants are identified, what corrective action will be taken? All data collection forms will be changed. 3. Who will be responsible for implementing each corrective action? The DDA Clinical Supervisor. 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? During our quarterly QA of participants charts. 5. By what date will the corrective action be completed? June 30, 2013. 	

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.683.03</p> <p>683. CHILDREN'S WAIVER SERVICES: COVERAGE AND LIMITATIONS. All children's DD waiver services must be identified on a plan of service developed by the family-centered planning team, including the plan developer, and must be recommended by a physician or other practitioner of the healing arts. In addition to the children's home and community based state plan option services described in Section 663 of these rules, the following services are available for waiver eligible participants and are reimbursable services when provided in accordance with these rules: (7-1-11) 03. Habilitative Intervention Evaluation. The purpose of the habilitative intervention evaluation is to guide the formation of developmentally-appropriate objectives and intervention strategies related to goals identified through the family-centered planning process. The habilitative interventionist must complete an evaluation prior to the initial provision of habilitative intervention services. The evaluation must include: (7-1-11)</p>	<p>Based on review of agency records, it was determined that 1 of 1 child participant receiving Habilitative Intervention (Participant B) lacked a Habilitative Intervention Evaluation completed prior to the initial provision of services.</p>	<ol style="list-style-type: none"> 1. What corrective action(s) will be taken? An HI Evaluation will be completed on all current HI participants and will be completed prior to starting any new participants. 2. How will the agency identify participants who may be affected by the deficiency(s)? All charts need an HI evaluation. If participants are identified, what corrective action will be taken? An HI evaluation will be completed. 3. Who will be responsible for implementing each corrective action? DDA Clinical Supervisor 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? It will be monitored during our quarterly QA of all participant charts. 5. By what date will the corrective action be completed? June 30, 2013 	
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.683.04.a.ii</p> <p>683. CHILDREN'S WAIVER SERVICES: COVERAGE AND LIMITATIONS. All children's DD waiver services must be identified on a plan of service developed by the family-centered planning team, including</p>	<p>Based on review of agency records, it was determined that 1 of 1 child participant receiving Habilitation Intervention (Participant B) had a skill development goal identified on the plan of service that lacked intervention provided by the Habilitative Intervention staff.</p>	<ol style="list-style-type: none"> 1. What corrective action(s) will be taken? All HI charts will be reviewed to ensure goals identified on the Plan of Service are being implemented on the HI PIP. 	

the plan developer, and must be recommended by a physician or other practitioner of the healing arts. In addition to the children's home and community based state plan option services described in Section 663 of these rules, the following services are available for waiver eligible participants and are reimbursable services when provided in accordance with these rules: (7-1-11)

04. Habilitative Intervention. Habilitative intervention services must be consistent, aggressive, and continuous and are provided to improve a child's functional skills and minimize problem behavior. Services include individual or group behavioral interventions and skill development activity. Habilitative intervention must be based upon the well-known and widely regarded principles of evidence-based treatment. Evidence-based treatment (EBT) refers to the use of mental and behavioral health interventions for which systematic empirical research has provided evidence of statistically significant effectiveness as treatments for specific problems. As "promising practices" meet statistically significant effectiveness, they could be included as approved approaches. (7-1-11)

a. Habilitative intervention must be provided to meet the intervention needs of the participant by developing adaptive skills for all participants, and addressing maladaptive behaviors for participants who exhibit them. (7-1-11)

i. When goals to address maladaptive behavior are identified on the plan of service, the intervention must include the development of replacement behavior rather than merely the elimination or suppression of maladaptive behavior that interferes with the child's overall general development, community, and social participation. (7-1-11)

ii. When goals to address skill development

For example, Participant B had an objective for shampooing his hair based on a hygiene goal. During the observation, staff was asked what intervention they used for this skill that is functional. Staff stated that HI staff do not work on this goal, and that the participant's mother does this goal. Staff asks the mother daily if the participant completed the skill. Based on this discussion, it does not appear that any intervention is being provided for this skill development as stated in the plan.

2. How will the agency identify participants who may be affected by the deficiency(s)? The agency will review all HI charts to ensure all goals on the Plans of Services are being run. If participants are identified, what corrective action will be taken? If participants are identified, the clinical supervisor and HI staff will collect data to write a PIP to include the identified goal on the participant's plan.
3. Who will be responsible for implementing each corrective action? The DDA Clinical Supervisor.
4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? It will be monitored during the quarterly QA of all participant's charts.
5. By what date will the corrective action be completed? June 30, 2013.

are identified on the plan of service, the intervention must provide for the acquisition of skills that are functional. (7-1-11)

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.10.683.08.d.iii</p> <p>683. CHILDREN'S WAIVER SERVICES: COVERAGE AND LIMITATIONS. All children's DD waiver services must be identified on a plan of service developed by the family-centered planning team, including the plan developer, and must be recommended by a physician or other practitioner of the healing arts. In addition to the children's home and community based state plan option services described in Section 663 of these rules, the following services are available for waiver eligible participants and are reimbursable services when provided in accordance with these rules: (7-1-11)</p> <p>08. Service limitations. Children's waiver services are subject to the following limitations: (7-1-11)</p> <p>d. For the children's waiver services listed in Subsections 683.01 through 683.07 of these rules, the following are excluded for Medicaid payment: (7-1-11)</p> <p>iii. Recreational services. (7-1-11)</p>	<p>Based on review of agency records, it was determined that 1 of 2 child participants (Participant B) was receiving recreational services, which are excluded for Medicaid payments.</p> <p>During the observation, Participant B told surveyors that his staff was taking him bowling later in the day during the Habilitative Intervention (HI) session. The participant also discussed times that the current HI staff has taken him bowling.</p>	<ol style="list-style-type: none"> 1. What corrective action(s) will be taken? All staff will be trained on the definition of recreational services and on the IDAPA code stating what activities are excluded while providing services. 2. How will the agency identify participants who may be affected by the deficiency(s)? All participant charts will be audited. If participants are identified, what corrective action will be taken? Staff will be trained. 3. Who will be responsible for implementing each corrective action? DDA Clinical Supervisor 4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? It will be monitored during the quarterly chart audit by the QA team. The clinical supervisor will also continue to review all data and case notes weekly. 5. By what date will the corrective action be completed? June 30, 2013 	

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.601.01.b</p> <p>601. RECORD REQUIREMENTS. Each DDA certified under these rules must maintain accurate, current, and complete participant and administrative records. These records must be maintained for at least five (5) years. Each participant record must support the individual's choices, interests, and needs that result in the type and amount of each service provided. Each participant record must clearly document the date, time, duration, and type of service, and include the signature of the individual providing the service, for each service provided. Each signature must be accompanied both by credentials and the date signed. Each agency must have an integrated participant records system to provide past and current information and to safeguard participant confidentiality under these rules. (7-1-11)</p> <p>01. General Records Requirements. Each participant record must contain the following information: (7-1-11)</p> <p>b. Program implementation plans that include participant's name, baseline statement, measurable objectives, written instructions to staff, service environments, target date, and corresponding program documentation and monitoring records when intervention services are delivered to the participant. (7-1-11)</p>	<p>Based on review of agency documentation, it was determined that 1 of 2 child participants (Participant B) lacked a target date on his Program Implementation Plan.</p> <p>The deficiency was corrected during the course of the survey. The agency is required to address questions 2-4 on the Plan of Correction.</p>	<p>2. How will the agency identify participants who may be affected by the deficiency(s)? All participants charts will be reviewed for compliance. If participants are identified, what corrective action will be taken? If a participant is identified a Target date will be added to the plan.</p> <p>3. Who will be responsible for implementing each corrective action? The DDA Clinical Supervisor</p> <p>4. How will the corrective action(s) be monitored to ensure consistent compliance with IDAPA Rules? It will be monitored quarterly by the QA team and by the Clinical Supervisor when new plans are written.</p>	

Administrator/Provider Signature: <i>Wangchun M Buehler BEA DSHICS</i>	Date: 4/23/13
Department POC Approval Signature: <i>E. D. [Signature]</i>	Date: 4/29/13

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