



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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May 13, 2014

Maureen Stokes, Supervisor
WITCO Development Center
3919 East Ustick Road
Caldwell, ID 83605

Dear Ms. Stokes:

Thank you for submitting the Plan of Correction for WITCO Development Center dated May 15, 2014, in response to the CARF Accreditation survey conducted on April 15, 2014. The Department has reviewed and approved the Plan of Correction.

As a result of the survey, we previously issued WITCO Development Center three-year certificates for the Caldwell, Fruitland, and Nampa locations effective from May 1, 2014, through April 30, 2017, unless otherwise suspended or revoked. Per IDAPA 16.03.21.125, these certificates were issued on the basis of substantial compliance and are contingent upon the correction of deficiencies.

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

Sincerely,

ERIC D. BROWN
Manager
DDA/ResHab Certification Program

EDB/slm

Enclosure

1. Approved Plan of Correction



Statement of Deficiencies

Developmental Disabilities Agency

WITCO Development Center
3WITCO009-4

3919 E Ustick Rd
Caldwell, ID 83605
(208) 454-3051

Survey Type: CARF Accreditation

Entrance Date: 4/15/2014

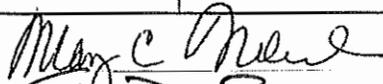
Exit Date: 4/15/2014

Initial Comments: Survey Team: Eric Brown, Program Manager, DDA/ResHab Certification Program; and Kerrie Ann Hull, Medical Program Specialist, DDA/ResHab Certification Program.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.03.21.601</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>Review of agency documentation revealed that 1 of 8 participant records reviewed lacked the signature and credentials of the staff providing the service.</p> <p>For example:</p> <p>Participant 5 had CSRs on file from March 11, 2014, through April 15, 2014, documenting the date, time, duration, and type of service being provided; however, there was no signature and credentials of the person providing the service. All of the CSRs reviewed within this timeframe for Participant 5 were lacking programming and data collection information.</p>	<ol style="list-style-type: none"> 1. Signatures and credentials of the person providing services will be documented on all Witco CSRs. Programming and data collection will also be documented. 2. Witco will ensure that all CSRs will have the necessary documentation to include signatures, credentials, programming, and data. 3. Program Specialists will be responsible for implementing each corrective action. 4. Program Specialists will review submitted CSRs to ensure that the problem is corrected and does not recur. 5. The corrective actions will take place May 5, 2014. 	2014-05-05

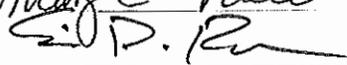
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Administrator/Provider Signature:



Date: 2014-05-15

Department POC Approval Signature:



Date: 5/13/14

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