



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

C.L. "BUTCH" OTTER – GOVERNOR  
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TAMARA PRISOCK – ADMINISTRATOR  
DIVISION OF LICENSING & CERTIFICATION  
P.O. Box 83720  
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September 23, 2013

Cliff McAleer, Administrator  
Milestone Decisions, Inc.  
611 South Main Street  
Moscow, ID 83843-3039

Dear Mr. McAleer:

Thank you for submitting the plan of correction for the residential habilitation agency operated by Milestone Decisions, Inc. dated September 13, 2013, in response to the recertification survey concluded on August 6, 2013. The Department has reviewed and accepted the plan of correction.

As a result, we have issued Milestone Decisions a full certificate effective from October 1, 2013, through September 30, 2016, unless otherwise suspended or revoked. Per IDAPA 16.04.17.101.02, this certificate is issued on the basis of substantial compliance and is 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 (208) 239-6267.

Sincerely,

KIMBERLY COLE  
Medical Program Specialist  
DDA/ResHab Certification Program

PLS/slm

Enclosures

1. Approved Plan of Correction
2. Renewed Residential Habilitation Agency Certificate



# Statement of Deficiencies

Residential Habilitation Agency

Milestone Decisions

RHA-199

611 S Main St

Moscow, ID 83843-3039

(208) 883-8262

**Survey Type:** Recertification

**Entrance Date:** 8/6/2013

**Exit Date:** 8/6/2013

**Initial Comments:** Survey Team: Kimberly D. Cole, Medical Program Specialist, DDA/ResHab Certification Program; Pam Loveland-Schmidt, Medical Program Specialist, DDA/ResHab Certification Program; and Bobbie Hamilton, Medical Program Specialist, DDA/ResHab Certification Program.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.03.10.705.01.a.iv 705. ADULT DD WAIVER SERVICES: PROVIDER QUALIFICATIONS AND DUTIES. All providers of waiver services must have a valid provider agreement with the Department. Performance under this agreement will be monitored by the Department. (3-19-07) 01. Residential Habilitation -- Supported Living. When residential habilitation services are provided by an agency, the agency must be certified by the Department as a Residential Habilitation Agency under IDAPA 16.04.17, "Rules Governing Residential Habilitation Agencies," and must supervise the direct services provided. Individuals who provide residential habilitation services in the home of the participant (supported living) must be employed by a Residential Habilitation Agency. Providers of residential habilitation services must meet the following requirements: (10-1-	Based on review of agency records, 6 of 7 employee records lacked documentation that employees were free from communicable diseases.  For example, Employees 2, 3, 4, 5, 6, and 7 did not have documentation to meet the requirement identifying that they were free from communicable diseases.	You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below: 1. Agency will develop A Health Screen History that will document employees are free from communicable disease 2. All current staff, as well as new hires, will be required to fill out the Health Screen History to insure they are free of communicable disease. 3. Administrator 4. A line item will be added to the initial employee orientation checklist that will require staff to fill out Health Screen History before they begin direct care with the participants. 5. By what date will the corrective actions be completed? Enter this date in the column to the far right.	2013-10-01

<p>12)T  a. Direct service staff must meet the following minimum qualifications: (3-19-07)  iv. Be free from communicable disease; (10-1-12)T</p>		<p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	
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<p>16.03.10.705.01.a.vi  705. ADULT DD WAIVER SERVICES: PROVIDER QUALIFICATIONS AND DUTIES. All providers of waiver services must have a valid provider agreement with the Department. Performance under this agreement will be monitored by the Department. (3-19-07)  01. Residential Habilitation -- Supported Living. When residential habilitation services are provided by an agency, the agency must be certified by the Department as a Residential Habilitation Agency under IDAPA 16.04.17, "Rules Governing Residential Habilitation Agencies," and must supervise the direct services provided. Individuals who provide residential habilitation services in the home of the participant (supported living) must be employed by a Residential Habilitation Agency. Providers of residential habilitation services must meet the following requirements: (10-1-</p>	<p>Based on review of agency records, it was identified that 1 of 7 employees (Employee 3) did not meet the rule requirements for Criminal History Background Checks.</p> <p>Employee 3's record lacked documentation that the employee met Criminal History rule requirements prior to working with participants. The employee's date of hire was January 1, 2011, and the DHW Criminal History Clearance was not given until October 3, 2011, which does not meet rule requirements.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will review requirements to satisfactorily complete a criminal background check and develop a protocol and a tracking system to insure all staff meet these requirements.</li> <li>2. Agency will review all staff records to insure we are in 100% compliance.</li> <li>3. Administrator</li> <li>4. Business Office Mgr. and Administrator will review protocol and tracking system monthly for all new employees.</li> <li>5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</li> </ol>	<p>2013-10-01</p>

<p>12)T  a. Direct service staff must meet the following minimum qualifications: (3-19-07)  vi. Residential habilitation service providers who provide direct care or services must satisfactorily complete a criminal background check in accordance with IDAPA 16.05.06, "Criminal History and Background Checks." (4-2-08)</p>		Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.	
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<p>16.04.17.201.03.c  201. ADMINISTRATION.  03. Responsibilities. The governing authority must assume responsibility for: (3-20-04)  c. Providing a continuing and annual program of overall agency evaluation; (3-29-12)</p>	<p>In review of administrative and participant records, the agency lacked documentation of continuing and annual program for overall agency evaluation.</p> <p>See also IDAPA 16.04.17.200.01.a—review of participant participation and satisfaction in services and identification, planning, and delivery.</p> <p>For example, in review of administrative record, no annual agency program evaluation was found. In discussion with the agency administrator, no formal evaluation report was in place to meet this rule.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will review and revise its continuing and annual program of overall agency evaluation.</li> <li>2. This review and revision will insure all participants receiving services from this agency will benefit from the agency evaluation.</li> <li>3. Administrator</li> <li>4. Administrator will provide the Milestone Decisions Board of Directors with a copy of the agency evaluation on an annual basis.</li> <li>5. Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</li> </ol>	2013-10-15

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.203.02</p> <p>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.</p> <p>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)</p> <p>02. Disabilities. Developmental disabilities commensurate with the skills of participants served. (3-20-04)</p>	<p>Based on review of agency records, 1 of 7 employees (Employee 3) lacked documentation of training on developmental disabilities commensurate with the skills of the participants served.</p> <p>REPEAT DEFICIENCY from 2010 survey.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will review and revise its orientation training and documentation process to ensure all employees receive training in the area of 16.04.17.203.02</li> <li>2. Agency will review the training documentation of all current employees to insure documentation and training has occurred.</li> <li>3. Administrator</li> <li>4. Administrator will review, on a monthly basis, all new staff training checklists to insure all areas of training have been completed.</li> <li>5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</li> </ol> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	<p>2013-10-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.203.03</p> <p>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.</p> <p>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)</p> <p>03. Understanding of Participants' Needs. A basic understanding of the needs, desires, goals and objectives of participants served. (3-20-04)</p>	<p>Based on review of employee records, 1 of 7 employees (Employee 3) lacked documentation of training on basic needs, desires, goals, and objectives of participants being served.</p> <p>REPEAT DEFICIENCY from 2010 survey.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will review and revise its orientation training and documentation process to ensure all employees receive training in the area of 16.04.17.203.03</li> <li>2. Agency will review the training documentation of all current employees to insure documentation and training has occurred.</li> <li>3. Administrator</li> <li>4. Administrator will review, on a monthly basis, all new staff training checklists to insure all areas of training have been completed.</li> <li>5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</li> </ol> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	<p>2013-10-15</p>

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.203.04</p> <p>203. STAFF RESIDENTIAL HABILITATION PROVIDER TRAINING.</p> <p>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) 04. Supervision. Appropriate methods of supervision. (7-1-95)</p>	<p>Based on review of agency records, 1 of 7 employees (Employee 3) lacked documentation of training on appropriate methods of supervision.</p> <p>REPEAT DEFICIENCY from 2010 survey.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will review and revise its orientation training and documentation process to ensure all employees receive training in the area of 16.04.17.203.04</li> <li>2. Agency will review the training documentation of all current employees to insure documentation and training has occurred.</li> <li>3. Administrator</li> <li>4. Administrator will review, on a monthly basis, all new staff training checklists to insure all areas of training have been completed.</li> <li>5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</li> </ol> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	2013-10-15
<p>16.04.17.301.03.i</p> <p>301. PERSONNEL.</p> <p>03. Personnel Records. A record for each employee must be maintained from date of</p>	<p>Based on review of agency records, 2 of 7 employee records (Employees 2 and 3) lacked documentation of maintaining CPR and First Aid certifications.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Employee will receive First Aid Training. Also,</li> </ol>	2013-10-15

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)

For Example:

Employee 2 did not maintain First Aid and CPR certification from December 3, 2010, through January 13, 2011, and from January 12, 2013, through March 28, 2013. It was also identified at the time of survey that Employee 2 did not currently have First Aid certification.

Employee 3 did not maintain First Aid and CPR certification from May 2012, through April 13, 2013.

the Agency will develop a tracking system to insure all employees have current First Aid/CPR certification.

2. Agency will review all employee records to insure all employees have current First Aid Certification.

3. Administrator

4. Administrator or Admin Designee will review tracking system monthly to insure all employees stay in compliance.

5. By what date will the corrective actions be completed? Enter this date in the column to the far right.

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Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.302.03 302. 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)</p>	<p>Based on review of 2 of 4 participant records (Participants 1 and 2), the agency lacked documentation of quarterly satisfaction reviews with participants.</p> <p>For example, Participants 1 and 2's records had inconsistent and/or less than quarterly satisfaction reviews with participants/guardians.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below: 1. Participants 1 and 2 will have satisfaction surveys completed. In addition, Agency will review and revise its periodic review of services to include additional methods of reviewing services and participant satisfaction to insure it is completed</p>	<p>2013-10-15</p>

		<p>quarterly.                  2. Agency will apply new standards to all participants.                  3. Program Coordinator                  4. Program Coordinator will document periodic review quarterly and Administrator will review at quarterly meeting                  5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</p> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	
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<p>16.04.17.400.02.f                      400. PARTICIPANT RECORDS.                      02. Required Information. Records must include at least the following information: (7-1-95)                      f. Physician, dentist, and other health care providers.</p>	<p>Based on review of 4 of 4 participant records (Participants 1, 2, 3, and 4), the agency lacked documentation of dentists.</p> <p>For example, Participants 1, 2, 3, and 4 had profile sheets with all requested documentation except for the designation of a dentist or the availability of a dentist.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:                      1. Participants 1,2,3,and 4 will have the designation of their dentist added to their profile sheets.                      2. Agency will review profile sheets of all participants to insure designation of a dentist are on each profile sheet.                      3. Administrator</p>	<p>2013-10-01</p>

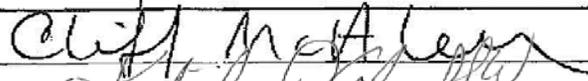
		<p>4. Participant records will be reviewed and updated annually by the Program Coordinator and the Administrator to insure all required information is in each participants record. 5.</p> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.400.02.h 400. PARTICIPANT RECORDS. 02. Required Information. Records must include at least the following information: (3-20-04) h. Results of a history and physical when necessary. (7-1-95)</p>	<p>Based on review of 1 of 4 participant records (Participant 4), the agency lacked documentation of a history and physical.  For example, Participant 4's record did not contain a history and physical at the time of survey.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below: 1. Agency will insure participant 4's record includes a history and physical. Agency will develop a checklist of the required information that need to be included in the participants record. 2. Agency will review all participants records to insure all required information is included in their records. 3. Program Coordinator 4. Participant records checklist will be reviewed annually at the plan date by Program Coordinator. 5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</p> <p>Text does not flow to the next page; you will need</p>	<p>2013-10-15</p>

		to click in the field on the next page to continue if your Plan of Correction straddles pages.	
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<b>Rule Reference/Text</b>	<b>Findings</b>	<b>Plan of Correction</b>	<b>Date to be Corrected</b>
<p>16.04.17.400.02.k</p> <p>400. PARTICIPANT RECORDS.</p> <p>02. Required Information. Records must include at least the following information: (3-20-04)</p> <p>k. Habilitation program, including documentation of planning, continuous evaluation, and participant satisfaction with the program. (3-20-04)</p>	<p>Based on review of 2 of 4 participant records (Participants 1 and 2), the agency lacked documentation of continuous evaluation of the habilitation program.</p> <p>For example, Participants 1 and 2 had PSR's with multiple objectives showing completion at 100% for more than 6 months. There was no evidence of continuous evaluation occurring due to the objectives/programs having not been changed or discontinued after the participants were consistently achieving 100%.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will insure participants 1 and 2 will receive immediate continuous evaluation of objectives/programs. In addition, agency will review and revise its criteria of continuous evaluation</li> <li>2. Agency will review all participant records to ensure continuous evaluation has been completed and documented.</li> <li>3. Program Coordinator</li> <li>4. Monthly flow sheets , outlining continuous evaluation , will be reviewed by the Administrator and the Program Coordinator, at the Quarterly meeting.</li> <li>5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</li> </ol> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	<p>2013-10-15</p>

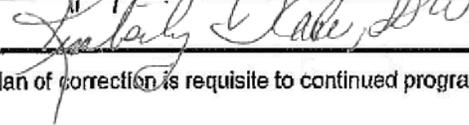
Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.400.02.n</p> <p>400. PARTICIPANT RECORDS.</p> <p>02. Required Information. Records must include at least the following information: (3-20-04)</p> <p>n. Daily record of the date, time, duration, and type of service provided. (7-1-95)</p>	<p>Based on review of 2 of 4 participant records (Participants 1 and 2), the agency lacked evidence that the daily record included the time and duration of service provided.</p> <p>Also see IDAPA 16.03.10.704.02.a.i.iv—direct service provider information which includes written documentation of each visit made or service provided to the participant including length of visit and the times in and out.</p> <p>For example, Participants 1 and 2's records had documentation of staff providing hours of skill training and a staffing schedule, but there was no documentation of the time in and time out.</p>	<p>You may overwrite the instructions in this field. To assure your agency's plan is consistent with IDAPA rules, please address the 5 questions listed below:</p> <ol style="list-style-type: none"> <li>1. Agency will review and revise the documentation of the daily record to insure time and duration of service are provided for participants one and two.</li> <li>2. This review and revision will be completed for all participants.</li> <li>3. Administrator and Program Coordinator</li> <li>4. The Time and Duration documentation will be reviewed bi-monthly as part of the census triple check procedure.</li> <li>5. By what date will the corrective actions be completed? Enter this date in the column to the far right.</li> </ol> <p>Text does not flow to the next page; you will need to click in the field on the next page to continue if your Plan of Correction straddles pages.</p>	2013-10-15

Administrator/Provider Signature:



Date: 2013-09-13

Department POC Approval Signature:



Date: 09/18/2013

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