

Statement of Deficiencies

Residential Habilitation Agency

Ambitions of Idaho -- Nampa
RHA-227

915 Parkcentre Way Ste 1
Nampa, ID 83651-1748
(208) 463-0110

Survey Type: Recertification

Entrance Date: 10/28/2014

Exit Date: 10/30/2014

Initial Comments: Surveyors: Eric Brown, Program Manager and Kerrie Ann Hull, Medical Program Specialist

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
16.04.17.203.06 203. 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) 06. First Aid and CPR. First aid, CPR, and universal precautions. (7-1-95)	Review of agency documentation revealed that 2 out of the 4 direct care employees reviewed (employee's 5 and 6) lacked current CPR/First Aid certification prior to accepting participants.	This corrective action was implemented company-wide prior to the ther final review. AOI had understood that there was a grace period outlined in rule as outlined in the verbiage of rule 16.04.17.203.06 as quoted; "All required training must be completed within the first six (6) months of employment...", and given the new understanding, all employees will receive first aid/cpr and universal precautions during the "new hire" phase of their training and before they work with individuals. The agency Administrator is responsible for the implementation, which occurred on 10/30/2014. We have also implemented a new system to identify all staff, future and present and we have increased the number of classes. We will provide the Department with our revised New Hire Orientation program no later than December 15, 2014. We also remain open to follow-up review from the Department.	12/15/2014

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<p>16.04.17.302.04</p> <p>302. SERVICE PROVISION PROCEDURES.</p> <p>04. Medication Standards. The agency must maintain a policy describing the program's system for handling participant medications which is in compliance with the IDAPA 23.01.01, "Rules of the Board of Nursing." (3-20-04)</p>	<p>Review of agency documentation revealed that the agency did not maintain the agency's medication policy describing the program's system, for handling participant medications which is in compliance with IDAPA 23.01.01, "Rules of the Board of Nursing". The agency failed to follow their medication policy regarding medication assistance documentation for 4 out of 4 participants.</p>	<p>As stated in the finding 4 documentation errors were cited. These errors were the result of the staff not following policy.</p> <p>We will continue a thorough review of documentation errors and continue to retrain staff. MAR's will be monitored as part of our monthly quality assurance reviews to be documented and reviewed at our weekly staffings.</p> <p>We have begun a retraining process with all of our staff and will provide the Department with documentation of this training. The agency Administrator or designee is responsible for the training to be completed company-wide no later than December 31, 2014.</p>	<p>12/31/2014</p>
<p>16.04.17.404.04</p> <p>404. COMMUNICATION WITH PARTICIPANTS, PARENTS, LEGAL GUARDIANS, AND OTHERS.</p> <p>The residential habilitation agency must promote participation of participants, legal guardians, relatives and friends in the process of providing services to a participant unless their participation is unobtainable or inappropriate as prescribed by the plan of service; and (3-20-04)</p> <p>04. Notification to Department of a Participant's</p>	<p>Review of agency documentation revealed that the agency failed to notify the Department within twenty-four hours of any significant incidents affecting health and safety or changes in a participant's condition for 2 out of 4 participants (Participant's 3 and 4).</p>	<p>As stated in the deficiency, 3 reports were identified as not being sent to IDHW within the time-frame required. Upon an internal investigation, we discovered a "bug" in our reporting system that caused some incident reports to remain in the manager's out-box. As a result, the manager received a report stating that the document had been sent, while IDHW did not have receipt of it. We will do a thorough review of all reports sent to IDHW to insure there are no late reports in manager's outboxes. (continued)</p>	<p>12/31/2014</p>

Condition. Through a Department approved process, the agency must notify the Department within twenty-four (24) hours of any significant incidents affecting health and safety or changes in a participant's condition, including serious illness, accident, death, emergency medical care, hospitalization, adult protective services contact and investigation, or if the participant is arrested, contacted by, or under investigation by law enforcement, or involved in any legal proceedings. The events and the agency response to the events must be documented in the participant file. (3-29-12)

We are working with our IT department to fix the issue and after December 15, 2014, there should be no further problems. In the interim we are checking outboxes to insure all documents and reports are sent in a timely fashion. This will be monitored daily. The agency Administrator or designee is responsible for the implementation companywide no later than December 31, 2014.

Administrator/Provider Signature:

William Morris (William Morris)

Date:

11/26/14

Department POC Approval Signature:

Kecie Ann Hull, LMSW

Date:

12/1/14

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