



IDAHO DEPARTMENT OF HEALTH & WELFARE
LICENSING & CERTIFICATION

DDA/ResHab Certification - Statement of Deficiencies

Agency:	Inspired by YOU, LLC	Region(s):	1
Agency Type:	DDA	Survey Dates:	11/27/2018
Certificate(s):	DDA-5372	Certificate(s) Granted:	<input type="checkbox"/> 6 - Month Provisional <input type="checkbox"/> 1 - Year Full <input type="checkbox"/> 3 - Year Full

Rule Reference/Text	Findings	Agency's Plan of Correction (Please refer to the Statement of Deficiencies cover letter for guidance)	Date to be Corrected (mm/dd/yyyy)
16.03.21.410.01.c. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 01. Yearly Training. The DDA must ensure that staff or volunteers who provide DDA services complete a minimum of twelve (12) hours of formal training each calendar year. Each agency staff providing services to participants must: c. Be trained to meet any special health or medical requirements of the participants they serve. (7-1-11)	<p>In review of agency documentation, there was no documentation of special health or medical requirements for participants served by agency staff.</p> <p>For example: Participant #1 requires glasses but breaks or refuses to wear them. There is no indication of this and how to run programs according to his needs for any staff working with the participant.</p> <p>Other participant files were reviewed to correspond with staff #3 and did not find documentation clearly identifying</p>	<p><i>1. To correct the deficiency, A Special Medical/Healthcare Needs training was provided to Staff working with participant #1 on 11-28-18 by the Clinical Supervisor Melaine Collins. The training provided included specific information on Participant #1 assistive technology needs as identified on both his POS and Medical, Social and Developmental Assessment Summary. In addition the Clinical Supervisor, Melaine Collins, contacted the family on 11-28-18 about participant #1 glasses and headphones not regularly being provided in all environments. Finally to correct the</i></p>	<p>11/28/18</p> <p>1/5/19 new client profile forms distributed to participants.</p> <p>1/5/19 client 'snapshot' pages added to working notebooks</p>



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	<p>training to meet special health or medical requirements for those participants.</p>	<p><i>deficiency a client 'snapshot' page with anecdotal need to know information such as needs help with engaging a zipper, but can independently pull the zipper up etc. will be added to the participants working notebook in January 2019 or sooner if the Clinical Supervisors have them ready. The 'snapshot' page will also include lines for staff signatures.</i></p> <p><i>2. To identify any other participants, staff, or systems that may be affected by the deficiency the staff CLIENT Training Log form was added to the Employee Training Log page (both kept in Staff File). The Client Profile Page was updated to include a line for staff signature under the Special Medical/Healthcare Needs section. The new client profile form will be provided to all participants by January 5th, 2019 when new releases of info and consumer surveys are distributed to families. The Clinical Supervisors will also check the POS, health and Physical and Medical, Social and Developmental Assessment Summary that The Idaho Independent Assessor, (aka Liberty</i></p>	
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		<p><i>Healthcare) provides the agency to ensure all identified needs on the reports are placed on the client profile sheet filled out by the parents. If discrepancies are found the Clinical Supervisor will contact the family to see if there are changes since the participants POS, H&P and the med soc report was written by the Independent Assessor or a specific reason why the need is not listed on the client profile sheet. Correspondence about discrepancies will be documented or attached to the back of the profile sheet in the participant's working notebook when applicable.</i></p> <p><i>3. The Administrator and Clinical Supervisor, Melaine Collins, will provide the new client profile sheet to each participant. The Clinical Supervisors Melaine Collins and Katie Maret will be responsible for providing Special medical/healthcare needs trainings to staff working with clients identified to have special medical/healthcare needs as identified on their Health and Physical, Client Profile Sheet and the Medical, Social and Developmental</i></p>	
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		<p><i>Summary Report. Client Profile Sheets will be photocopied, when completed, and a copy will be placed in their permanent file. The Clinical Supervisors, Melaine Collins or Katie Maret will be responsible for ensuring the client 'snapshot' page is in the participants working notebook and that all staff working with the participant have had time to read and discuss the 'snapshot' page and have signed and dated the form as proof that they have been trained on the participant.</i></p> <p><i>4. To monitor corrective actions and ensure the problem is corrected and does not reoccur the Staff CLIENT training log was added to the Employee training log section of their personal files. The QA process was updated in the policies and procedures to include checking off on staff trainings specifically in the area of special medical/healthcare needs. The quarterly staff audits form was updated to ensure all staff have been trained in the area of special medical/healthcare needs.</i></p>	
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<p>16.03.21.410.02. 410. GENERAL TRAINING REQUIREMENTS FOR DDA STAFF. Each DDA must ensure that all training of staff specific to service delivery to the participant is completed as follows: 02. Sufficient Training. Training of all staff must include the following as applicable to their work assignments and responsibilities:</p>	<p>In review of training documentation, observations and staff meeting notes, there was insufficient documentation to determine training was provided to staff as applicable to their work assignments in each component of rule:</p> <ul style="list-style-type: none">a. Optimal independence of all participants is encouraged, supported, and reinforced through appropriate activities, opportunities, and training;b. Correct and appropriate use of assistive technology used by participants;c. Accurate record keeping and data collection procedures;d. Adequate observation, review, and monitoring of staff, volunteer, and participant performance to promote the achievement of participant goals and objectives;e. Participant's rights, advocacy resources, confidentiality, safety, and welfare;	<p><i>1.To correct the deficiency and ensure c)accurate record keeping and data collection procedures d)Adequate observation, review, and monitoring of staff, volunteer, and participant performance to promote the achievement of participant goals and objectives and e) Participant's rights, advocacy resources, confidentiality, safety, and welfare; the new employee training log was updated on 12/3/18 to reflect all paperwork procedures to include new items as follows: Billing logs, data sheets/data collection procedures, Staffing Note Forms, Time Sheets, Monthly Data Summaries, Staff Observations and Working Notebooks which were not line itemed on the previous training sheet. In addition a)Optimal independence of all participants is encouraged, supported and reinforced through appropriate activities as outlined in the child's POS, Intake forms and HI Plan, staff members working with participants will continue to be trained on the child's HI plan before working with the client this will continue to be documented on the client profile sheet with a signature and date from the</i></p>	<p>12/3/18</p>
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		<p><i>staff member receiving the training.</i></p> <p><i>b)Correct and appropriate use of assistive technology used by participants is also on the client profile sheet, the Clinical Supervisors will ensure the staff member working with the participant has been trained on the use of assistive technology specific to the participants identified needs before beginning to work with the participant.</i></p> <p><i>2. To identify any other participants, staff, or systems that may be affected by the deficiency the Clinical Supervisor will retrain all staff on all paperwork procedures at our agency in service day scheduled for 12/16/18 at which time the staff members will sign off that they have been trained on all paperwork procedures by one of the Clinical Supervisors, Melaine Collins or Katie Maret. All new staff will be trained utilizing the updated Employee Training Log. All Staff hired after 12/16/18 will sign off on the new form during their initial hiring phase and agency orientation. On 12/3/18 The Staff File Review Audit Form was updated to</i></p>	
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		<p><i>expand on the 'Employee Training Log' Line Item with new directives to staff to check for items to be initialed by C.S. and signed by the employee that they did receive training on all agency paperwork components to include Billing Logs, Data Sheets/Data Collection Procedures, Staffing Note Forms, Time Sheets, Monthly Data Summaries, Staff Observations and Working Notebooks.</i></p> <p><i>3. The Administrator, Melaine Collins, updated the policies and procedures to reflect paperwork components, such as, Billing Logs, Data Sheets/Data Collection procedures, Staffing Note Forms, Time Sheets, Monthly Data Summaries, Staff Observations and Working Notebooks as part of the initial training phase for new employees. Melaine Collins, Administrator/Clinical Supervisor updated the employee training form to reflect additions on 12/3/18</i></p> <p><i>4. To monitor the corrective action and ensure the problem is corrected and does not reoccur, quarterly audits will be conducted by the Clinical Supervisor,</i></p>	
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		<i>Melaine Collins, or designated staff member.</i>	
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Agency Representative & Title: Melaine Collins, Administrator <i>* By entering my name and title, I agree to implement this plan of correction as stated above.</i>	Date Submitted: 12/11/18.
Department Representative & Title: <i>* By entering my name and title, I approve of this plan of correction as it is written on the date identified.</i>	Date Approved: 12/13/18