IDAHO DEPARTMENT OF
HEALTH & WELFARE

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August 12, 2008

R&T Agency Inc,
Administrator, Eugene McHugh
2707 Highway 95N
Cottonwood, ID 83522

Dear Ms. McHugh,

Thank you for submitting the Plan of Correction for R& T Agency6, Inc. Residential Habilitation services dated 8/12/2008 The Department has reviewed and accepted the Plan of Correction in response to the Department's Compliance Review findings. As a result, we have issued a full certificate effective 8/12/2008 unless otherwise suspended or revoked.

This certificate is contingent upon the correction of deficiencies. Your agency will be required to submit documentation to substantiate that your Plan of Correction has been met. Documentation must be submitted within 7 days of the date of completion listed on your agency's plan of correction and no later than November 7, 2008. You may submit supporting documentation as follows:

Fax to: 208-364-1811,
Email to:fadnessr@dhw.idaho.gov,
Mail to: Rebecca Fadness, Survey and Certification PO Box 83720, Boise Idaho 83720-0036
Or deliver to: DHW 3232 Elder Street, Boise Idaho 83720

You can reach me if you have any questions at 208-364-1906 or 1-877-457-2815.

Thank you for your patience and accommodating us through the survey process.

Rebecca Fadness
Program Supervisor
DDA/RH Survey and Certification

IDAHO DEPARTMENT OF HEALTH & WELFARE

RESIDENTIAL HABILITATION AGENCY COMPLIANCE REVIEW

AGENCY NAME: R & T AGENCY, INC.

REVIEW DATE(s): 6/18/08

NOTE: This document contains a listing of findings made by the survey team. The summary of survey findings is based on the survey team's professional knowledge and interpretation of IDAPA requirements. In the Column, "Agency's Plan for Compliance", the statement should reflect the agency's plan for compliance action and anticipated time for plan to be implemented.

REVIEW TEAM MEMBERS: Rebecca Fadness, Program Supervisor;
Greg Miles, Medical Program Specialist;
Cyndi Jonsson, Clinician

SURVEY FINDINGS

Therapy Observation Notes:

Deficiencies:	Agency's Plan for Compliance:
16.04.17. 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) **A-5.1** A participant's implementation plan should be modified when there are changes in circumstances, abilities, or a re-assessment to ensure that public funds are expended for appropriate services in the most cost effective manner. **FINDINGS:** Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Agency files do not contain documentation of periodic reviews of services quarterly. Documentation of review included six month	

and annual summaries of data. No modifications or revisions were made to the plan to account for progress or regression. Documentation was not sufficient to support ongoing review of progress.	
16.04.17. 402.PARTICIPANT RIGHTS. **c.** Inform each participant, or legal guardian, of the services to be received, the expected benefits and attendant risks of receiving those services, and of the right to refuse services, and alternative forms of services available; (3-20-04) **FINDINGS:** Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Agency files do not contain documentation that the participants were informed of the above.	
16.04.17.010.22Implementation Plan. Written documentation of participants' needs, desires, goals and measurable objectives, including documentation of planning, ongoing evaluation, data-based progress and participant satisfaction of the program developed, implemented, and provided by the agency specific to the plan of service. (3-20-04) **16.04.17. 011. DEFINITIONS – 01.Measurable Objective.** A statement which specifically describes the skill to be acquired or service/support to be provided, includes quantifiable criteria for determining progress towards and attainment of the service, support or skill, and identifies a projected date of attainment. (7-1-95) **FINDINGS:** Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Objectives are not measurable. Objectives listed on the implementation plan do not contain components to measure actual performance. Objectives should contain the skill to be measured, the prompting required, and the criteria for measurement and change (i.e. When at the grocery store, Bob will place an item into the grocery cart with 1 verbal cue, 3 of 4 trials per month, for 3 consecutive months).	
16.04.17. 703.DD/ISSH WAIVER SERVICES - COVERAGE AND	

LIMITATIONS. 01. Residential Habilitation. Residential habilitation services which consist of an integrated array of individually-tailored services and supports furnished to eligible participants which are designed to assist them to reside successfully in their own homes, with their families, or alternate family homes. The services and supports that may be furnished consist of the following: (3-19-07) **a.** Habilitation services aimed at assisting the individual to acquire retain or improve his ability to reside as independently as possible in the community or maintain family unity. Habilitation services include training in one (1) or more of the following areas: (3-19-07) **c.** Skills training to teach waiver participants, family members, alternative family caregiver(s), or a participant's roommate or neighbor to perform activities with greater independence and to carry out or reinforce habilitation training. Services are focused on training and are not designed to provide substitute task performance. Skills training is provided to encourage and accelerate development in independent daily living skills, self direction, money management, socialization, mobility and other therapeutic programs. (3-19-07) **16.04.17.010.22Implementation Plan.** Written documentation of participants' needs, desires, goals and measurable objectives, including documentation of planning, ongoing evaluation, data-based progress and participant satisfaction of the program developed, implemented, and provided by the agency specific to the plan of service. (3-20-04) **FINDINGS:** Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Participant's implementation plans did not contain specific instructions to providers that promote acquisition of skill. Instructions should set-up the environment and include specific intervention strategies and training components that will guide the staff to consistent implementation of training.	
16.04.17. 300.POLICY AND PROCEDURE MANUAL. The manual must, at a minimum, include policies and procedures reflecting the following: **09**. Participant Rights. Personal, civil, and human rights and dissemination of participant rights policies.	

FINDINGS: Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Policies and Procedures Manual does not include P&P's that reflect the dissemination of participant rights policies. The current business operations could be articulated in the manual.	
16.04.17. 300.POLICY AND PROCEDURE MANUAL. The manual must, at a minimum, include policies and procedures reflecting the following: **05.** Participant Safety. Participant safety assessment procedures. **FINDINGS:** Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Manual does not reflect the procedures for assessment of a participant's safety needs.	
16.04.17. 202.ADMINISTRATOR. 03. Responsibilities b. Developing and implementing policies and procedures for staff and affiliated residential habilitation provider training, quality assurance, evaluation, and supervision; **FINDINGS:** Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • There are no policies and procedures for staff and affiliated residential habilitation evaluation.	
16.03.10.705. DD/ISSH WAIVER SERVICES - PROVIDER QUALIFICATIONS AND DUTIES. **d.** Additional training requirements must be completed within six (6) months of employment or affiliation with the residential habilitation agency **16.04.17. 203.STAFF AND AFFILIATED RESIDENTIAL HABILITATION PROVIDER TRAINING** All required training must be completed within six (6) months of employment or affiliation with a residential habilitation agency and documented in the employee or affiliated residential habilitation provider record.	

IDAHO DEPARTMENT OF
HEALTH & WELFARE

FINDINGS: Based upon record review and interview with Administrator, the agency in not in compliance. Agency documents **lacked evidence as follows:** • Agency does not provide all required training components to each employee or affiliate.	

Survey report completed by : Rebecca Fadness, Program Supervisor; Greg Miles, Medical Program Specialist Date: 6/20/08

Agency Administrator Signature: See Attached Doc Date: _____

Plan of correction accepted: [signature] Date: 8/12/08

R & T AGENCY, INC.

August 11, 2008

Rebecca Fadness
Program Supervisor
Medicaid Survey and Certification
Idaho Department of Health and Welfare
PO Box 83720
Boise ID 83720-0036

Dear Rebecca:

RE: Residential Habilitation Agency Compliance Review, June 18, 2008. **(Revised POC).**

Deficiencies:	Agency's Plan for Compliance: (1. Corrective action.)
16.04.17.302. Service Provision Procedures.	Agency will send participant satisfaction surveys in the mail or with the Agency's program coordinator every 3 months. Services will be reviewed quarterly. Plans will be modified when the results of the reviews indicate progress or regression. Documentation will be contained in the participant's file. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator, further delegated to appropriate staff. 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action will be completed by October 15, 2008.
16.04.17.402. Participant Rights.	Documentation of R & T Agency's compliance with the provisions of 06.04.17.402.c. will be by having participant sign a document acknowledging receipt of this information. This document will be contained in the participant's file. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator, further delegated to appropriate staff. 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action will be completed by **October 30, 2008**.
16.04.17.010.22. Implementation Plan.	Formal goals will be revised to contain components to measure actual performance. Objectives will contain the skill to be measured, the prompting required, and the criteria for measurement and change. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator, Program Coordinator 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action – **sample, Oct. 30, 2008 – remainder Jan. 30, 2008.**

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R & T Agency, Inc. August 6, 2008

Residential Habilitation Agency Compliance Review, June 18, 2008.

Deficiencies:	Agency's Plan for Compliance: (1. Corrective action.)
Limitations. .01. Residential Habilitation	The terminology in the implementation plan will include specific instructions to ensure providers are guiding participants to successfully complete goals as written. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator, Program Coordinator 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action – **sample, Oct. 30, 2008 – remainder Jan. 30, 2008.**
16.04.17.300.09 Participant Rights.	R & T Agency's Policy and Procedure Manual will be amended to reflect the dissemination of participant rights policies. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action will be completed by **October 30, 2008.**
16.04.17.300.05 Participant Safety.	R & T Agency's Policy and Procedure Manual will be amended to include assessment of participant safety and safety needs. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action will be completed by **October 30, 2008.**
16.04.17.202.03.b Responsibilities.	R & T Agency's Policy and Procedure Manual will be expanded to include procedures for staff and affiliated residential habilitation evaluation. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action will be completed by **October 30, 2008.**

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R & T Agency, Inc. August 6, 2008

Residential Habilitation Agency Compliance Review, June 18, 2008.

Deficiencies:	Agency's Plan for Compliance: (1. Corrective action.)
16.04.17.203 Staff & Affiliated Provider Training.	All required training will be completed and documentation placed in employee and affiliated providers files. 2. All participants are affected by this deficiency. Corrective action as stated. 3. Responsibility – Administrator, further delegated to appropriate staff. 4. IDAPA Rules will be reviewed quarterly as they pertain to this deficiency to ensure Agency's corrective action is in compliance. 5. Corrective action will be completed by **October 30, 2008.**

Sincerely,

Eugene McHugh

Eugene McHugh
Administrator

R & T Agency, Inc.
2707 Highway 95 N
Cottonwood, ID 83522

208 962-5170
Fax 208 962-5170

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