

Secrets to Creating a Successful Plan of Correction

Presented by: Patrick Hills and Crystal Harmon

Guidelines





Phones on vibrate or silent



Please take calls outside



Reserve all questions until the end

Meet the CDA Plan of Correction Team





Patrick Hills
Analyst



Christian GonzalezAnalyst



Beverly VoorstadNurse



Crystal Harmon Manager

Objectives





Understanding the plan of correction (POC) process



Develop strategies for a successful plan of correction



Navigating the Peach Provider Portal to submit a plan of correction and supporting documentation

Agenda





Recap - CBAS Survey: On Your Mark, Get Set, Go!



Post Community Based Adult Services (CBAS) Survey



Plan of Correction & Supporting Documents



Plan of Correction 101



Recap

CBAS Survey: On Your Mark, Get Set, Go!

Post CBAS Survey



Exit Conference

Preliminary Findings Additional Evidence

Post CBAS Survey Cont.



Actionable Steps:

- In-service training
- Reviewing policies and procedures
- Conducting participant record audits
- Updating assessments, Individual Plans of Care, and flow sheets
- Creating logs
- Updating staffing forms and registry contracts

Plan of Correction & Supporting Documentations





Plan of Correction process

Cover letter

Statement of deficiencies

Confidential names list

What is a Plan of Correction?





Provider's commitment to compliance with all Medi-Cal certification requirements.



Developed in response to each deficiency cited in the Statement of Deficiencies (SOD) (CDA 2567).



Medi-Cal certification cannot occur without an acceptable Plan of Correction.

What is a Plan of Correction?



Commitment To Compliance

Compliance =

- Welfare and Institutions Code
- Title 22
- Home & Community Based Person-Centered Planning Regulations
- 1115 Waiver Special Terms and Conditions
- Health and Safety Code
- CBAS Resource Guide

Plan of Correction Notification Letter



Subject Statement of Deficiencies issued and Plan of Correction Due

Hello,

On XX/XXXXX, the California Department of Aging (CDA) conducted a certification renewal survey to determine your center's compliance with Medi-Cal certification requirements. Your center's Statement of Deficiencies - 2567 report (SOD - 2567) cover letter and the confidential names list of staff/participants were uploaded to PEACH.

A completed Plan of Correction (POC) must be written for each deficiency using the CDA CBAS POC form and returned to this office via the Peach Provider Portal by XX/XX/XXXX.

The POC tool has been uploaded into the PEACH portal for your review and response. <u>Please review the SOD – 2567 along with the POC tool to provide you with a full description of the deficiencies required to resolve.</u> Additionally, upload your completed POC tool and any supporting documentation by the close of business on <u>XX/XX/XXXX</u>. Furthermore, please name the file for supporting documentation you upload (i.e., discharge paperwork, sign-in sheets, training, etc.) according to the finding number or identify the evidence according to the citation. Additionally, save and submit your POC tool in a <u>Word document</u>.

If you have any questions, please do not hesitate to contact me, as I will be overseeing and reviewing your POC. Please send a confirmation email you are in receipt of the information above.

Regards,

State of Deficiencies & Plan of Correction Receipt



- Notification of plan of correction
- Statement of deficiencies, cover letter, instructions, and frequently asked questions
- 15 business days to submit the initial response
- Notifying CDA of it's receipt via email

Cover Letter



STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

GAVIN NEWSOM Governor

CALIFORNIA DEPARTMENT OF AGING

Community-Based Adult Services Bureau

2880 Gateway Oaks Drive, Suite 200 Sacramento, CA 95833 www.aging.ca.gov TEL 916-419-7545 TTY1-800-735-2929



August 30, 2023



On May 23, 2023 through May 24, 2023, Program Advisors, Community-Based Adult Services (CBAS) Bureau, California Department of Aging (CDA), conducted a certification renewal survey of Adult Day Health Care Center to determine compliance with Medi-Cal certification requirements. The enclosed Statement of Deficiencies (SOD), CDA 2567 specifies the deficiencies identified during the survey and discussed during the survey exit conference. A Confidential Names List, with the names of the participants and/or staff who are referenced in this report and/or part of the survey sample, has been provided to the Program Director.

When deficiencies are identified during a survey, submission of an acceptable plan of correction serves as your commitment to compliance with all Medi-Cal certification requirements. This commitment to compliance indicates that you have taken necessary corrective action and that the deficient practices identified have been resolved or will be resolved by the date you indicate. Your commitment to compliance allows the Department to renew your Medi-Cal certification by accepting that your Center is in compliance with all related Medi-Cal laws and regulations as required by Welfare and Institutions Code, Section 14552, based upon an acceptable Plan of Correction (POC).

A completed POC must be written for each deficiency using the CDA CBAS POC form and returned to this office by September 21, 2023. C form through the CDA Peach Provider Portal web application using your center's user name and password issued by CDA. Enclosed is a copy of the SOD, CDA 2567, the CDA Peach Provider Portal web application submission instructions, and the POC FAQ's.

Failure to submit a POC by the due date may result in the CDA recommending to the Department of Health Care Services non-renewal of your Medi-Cal certification or the imposition of other sanctions.

The written POC for each deficiency cited must:

Cover Letter Cont.







COMMUNITY-BASED ADULT SERVICES (CBAS)

PEACH PROVIDER PORTAL SUBMISSION INSTRUCTIONS

The Peach Provider Portal allows CBAS centers to securely submit files to the California Department of Aging (CDA).

Files containing confidential and protected health information (PHI), are subject to regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Do not share your username and/or password with anyone.

INSTRUCTIONS FOR SUBMITTING FILES VIA THE CDA PEACH PROVIDER PORTAL

- 1. Go to: https://peach.aging.ca.gov using your Google Chrome internet browser.
- 2. Enter your email address and select Submit. An email will be generated to your email address if you have a user account.
- 3. Click the link provided in the email to access the Peach Provider Portal Login Page and enter your passphrase.

NOTE: For detailed instructions regarding the login process, please consult the Peach Provider Portal Login Instructions document on the CBAS webpage.

- 4. Select either File Upload, MSSR, or PCR from the home page.
- 5. For "File Upload" uploads, proceed according to the following instructions:
- 6. In the first box, select your appropriate center from the drop-down list.

NOTE: If you are a representative of more than one center those centers will appear in the drop-down list.

- 7. Select "Add New Files" to locate your file.
- 8. Navigate to the file you want to upload select the file and select "Open".
- 9. Select the "+" to add more files or select "Upload 1 file" to upload the file.

Cover Letter Cont.







PLAN OF CORRECTION FREQUENTLY ASKED QUESTIONS (FAQ)

1. Why is a plan of correction required?	Welfare and Institutions Code, Section 14574 requires a Community-Based Adult Services (CBAS) provider to maintain compliance with all CBAS standards for purposes of Medi-Cal certification. A Plan of Correction (POC) is the provider's allegation of compliance when deficiencies have been cited. Medi-Cal certification cannot occur without an acceptable POC in place.			
2. What is a POC?	A Plan of Correction (POC) is developed in response to each deficiency cited in the Statement of Deficiencies (SOD) (CDA 2567). The POC is designed to correct the specific deficiencies cited in the SOD, CDA 2567, and ensure processes are in place to prevent the deficiencies from recurring. All deficiencies cited in the SOD, CDA 2567, must be individually addressed in your POC. POCs are due 15 days following the issuance of your SOD, CDA 2567.			
3. What if the center cannot submit the POC by the date specified?				
4. What if the center POC is not acceptable?	C is not may be requested to submit a revised POC and/or additional evidence.			
5. Is the Center subject to a re-visit to determine if a POC has been successfully implemented?	Yes. Welfare and Institutions Code, Section 14574.1 directs the department to conduct CBAS inspections as often as is necessary to ensure the quality of care being provided. The department may, at any time, initiate a survey visit to determine whether a POC has been implemented (The visit will not be conducted prior to the time the center alleges all corrections have been made).			

What is a Statement of Deficiencies?



- Statement of Deficiencies = SOD = 2576
- Observation
- Interview(s)
- Record review
- Law or Regulation
- Brief Narrative

What is a Statement of Deficiencies? Cont.



California Department of Aging, Community-Based Adult Services Bureau

Statement of Deficiencies Provider Number

Date(s) Survey Conducted 05/23/23 through 05/24/23

Statement of Deficiencies

The following is a list of deficiencies which were identified during the Certification Renewal Survey (ID # conducted on 05/23/23 through 05/24/23 by



Health Program Advisor Health Program Advisor

of the Community-Based Adult Services (CBAS) Bureau, California Department of Aging. For each deficiency, the corresponding law and/or regulation is identified and described and evidence is specified regarding how the requirement in the law and/or regulation was not met.

Total citations in this report = 2 Total repeat deficiencies from previous surveys = 0

Participants referenced in this report are identified as Participants #1 through #6. Please refer to the Confidential Names List for their names, Client Identification Numbers (CIN), and Individual Plan of Care (IPC) effective dates.

#1 Title 22 54207(a)(1)

MULTIDISCIPLINARY TEAM ASSESSMENT



- (a) Each applicant shall be assessed by a multidisciplinary team prior to acceptance into the program. The assessment shall be conducted by the adult day health care provider in order to ascertain the individual's pathological diagnosis, physical disabilities, functional abilities, psychological status and social and physical environment. The assessment shall include:
- (1) Contact with the applicant's physician to obtain the individual's medical history and a statement indicating the applicant's restrictions and medications and absence of infectious disease. If the applicant does not have a personal physician, the center shall assist the individual in finding one. An initial physical examination may be done by the staff physician or by a nurse practitioner under the supervision of a physician to the extent allowed under state law.

P. 1/3

What is a Confidential Names List?



Center staff interviewed

 Participants referenced in SOD

 Participants & center staff numbered

Confidential Names List

Center: Beverly Adult Day Health Care Center

NPI: 555555555

Date(s) Survey Conducted: 05/23/23 through 05/24/23

Statutes and regulations require that the names of Community Based Adult Services participants and staff not be disclosed. The following is a list of participants and staff and the corresponding reference numbers which will be used in the public reports.

Participants

*Ref #	Name	Record Type	CIN	IPC Effective From Date
1	Mickey Mouse	Random	5555555D	10/01/2022
2	Donald Duck	Random	6666666D	10/01/2022
3	Minni Mouse	Random	7777777G	11/01/2022
4	Goofy Goof	Random	8888888E	11/01/2022
5	Daisy Duck	Random	9999999E	02/02/2023

^{*}Ref # corresponds to the reference number(s) used on the public report.

Center Staffs

Ref #	Name	Title
1	Cheshire Cat	Program Director
2	Tinkler Bell	Social Worker
3	Buzz Lightyear	Social Worker
4	Jiminy Crickey	Registered Nurse

Where to Find the Plan of Correction and Supporting Documentation?

California Department of **AGING**

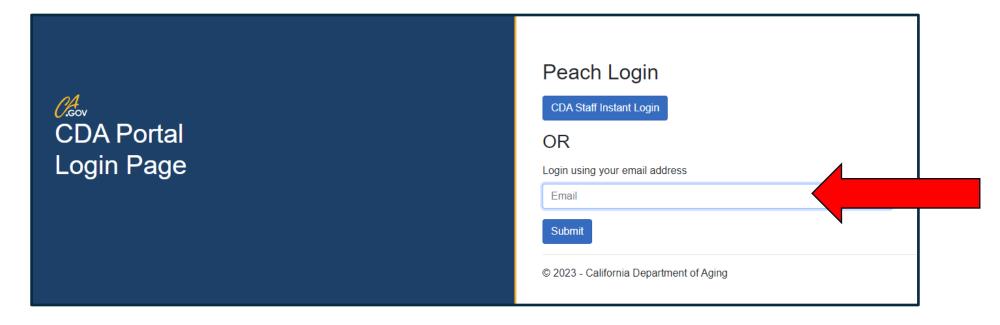
- Peach Portal http://peach.aging.ca.gov
- Statement of Deficiency
- Cover Letter
- Plan of Correction
- Confidential Names List
- The provider should download all files



Forgotten Passphrase

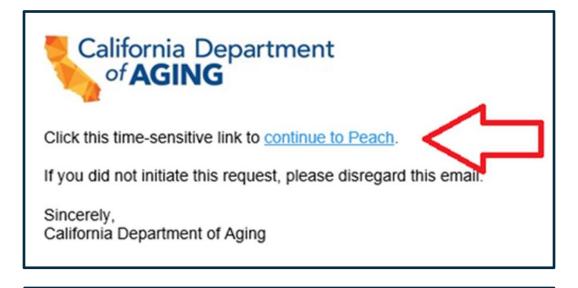


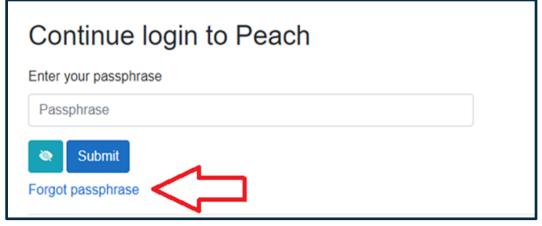
Peach Portal http://peach.aging.ca.gov



Forgotten Passphrase







Forgot Passphrase





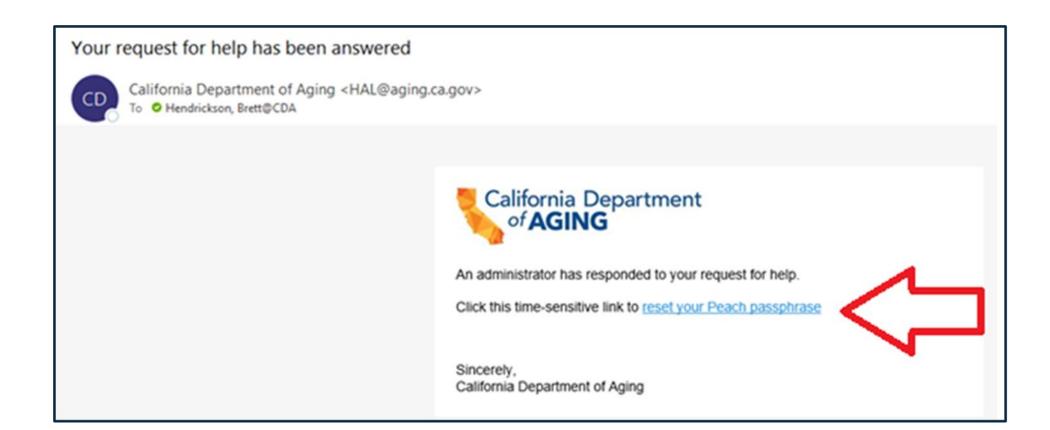
Request Sent

- Your request has been sent to the system administrator. Once it is approved, you will receive an email with further instructions.
- If you do not receive an email within two hours, contact your administrator, or try the request again.

Back to Login

Forgot Passphrase





Where to Find the Plan of Correction? Cont.



25

File Upload							
Center	2nd Century Adult Day Health Care Center						
+ Add N	+ Add New Files						
Show 10 \$ entries							
File	↑↓ File Type	↑↓					
Showing 0	to 0 of 0 entries						

POC Tool 101





Do's & Don'ts

10/26/2023 26

Respond to CDA confirming receipt of the POC notification

Respond using the CDA provided plan of correction Word document

Respond to the last plan of correction Word document submitted by CDA

Answer all questions with complete sentences

Email or call the plan of corrections team member with clarifying questions

Submit all evidence to support responses in the plan of correction

Submit a "working" sample of new forms in use whenever possible

Clearly label evidence with the corresponding citation number. Such as Citation #1, etc.

Adhere to the deadline imposed by CDA

DON'T

Re-format the plan of correction tool

Change previous responses

Email evidence or the plan of correction tool to CDA

Include records from participants not named in the survey

Name the same person to implement and monitor

POC Tool 101





Plan of Correction Components & Process

POC Tool 101 Cont.





The POC tool will include all deficiencies that must be resolved.



All deficiencies must be individually addressed



All deficiencies will include a brief synopsis



The POC tool comprises five boxes A, B, C, D, and E



https://www.youtube.com/watch?v=un-uOq3m2wI&t=1s

Plan of Correction Tool 101 Cont.



	#1	Citation Number:	Describe the deficiency:	CDA USE
		Title 22 54207(a)(1)	For Participant #5, the center failed to obtain a tuberculosis (TB)	ONLY
			clearance within one year of the participant's enrollment date.	
				☐ Met
				□ Not
				Met
		Components of POC	Center Plan of Correction	
			Center POC Response:	
		Describe how this deficiency was corrected for each participant, staff or problem identified in the 2567 report. Furthermore, identify the date of correction for the deficiency. If not yet corrected, explain why and specify a date when the		
Α	١.		CDA Response:	
7			·	
		deficiency will be corrected.		
			Center POC Response:	
		Describe how the center corrected the deficient		
		practice for any other participants and/or staff who		
		may have been similarly affected. Furthermore, identify the date of correction for the deficiency. If not yet corrected, explain why and specify a date		
B.	}.		CDA Response:	
			OD/ (100poliso.	
		when the deficiency will be corrected.		

Component A



Components of POC		Center Plan of Correction
A.	Describe how this deficiency was corrected for each participant, staff or problem identified in the 2567 report. Furthermore, identify the date of correction for the deficiency. If not yet corrected, explain why and specify a date when the deficiency will be corrected.	Center POC Response: CDA Response:

- How?
- What action(s)?
- What evidence?
- Who?
- When?

Component B



		Center POC Response:
B.	Describe how the center corrected the deficient practice for any other participants and/or staff who may have been similarly affected. Furthermore, identify the date of correction for the deficiency. If not yet corrected, explain why and specify a date when the deficiency will be corrected.	CDA Response:

- Other participants and staff
- Were other Participants affected?
 - How did the center address other Participants or staff?
 - Will other records be reviewed?

Component C



	Identify the title of the person responsible for implementing the correction and the step-by-step process to ensure the deficiency is not repeated.	Center POC Response:
C.	(e.g., RN, SW, AC, PT, OT, RD, MH, PD).	
		CDA Response:

- Who will implement?
- Step-by-step process

Component D



D.	Provide a step-by-step description of how the center is monitoring to ensure the deficiency is corrected, the frequency of monitoring, and who the responsible supervisor is (AD or PD or other).	Center POC Response:
		CDA Response:

- Who will monitor?
- Step-by-step process.

Component E



	Submit supporting evidence to substantiate that	Center POC Response:
	each specific part of the deficiency was corrected	
	(e.g. in-service training, policies and procedures,	
	pictures).	
E.		
		CDA Response:
		·

- Correct evidence.
- Files clearly labeled.
 - For example: Citations #1 Evidence, Citation #2 Evidence, etc.
- Discharged paperwork.
- Relevant evidence.
 - Policies and Procedures, assessments, IPCs, flow sheets, in-service training logs and handouts, updated staffing forms, etc.

Plan of Correction Tool 101 Cont.





"Who do I contact if I have questions?"

Submitting the POC and Evidence to Peach



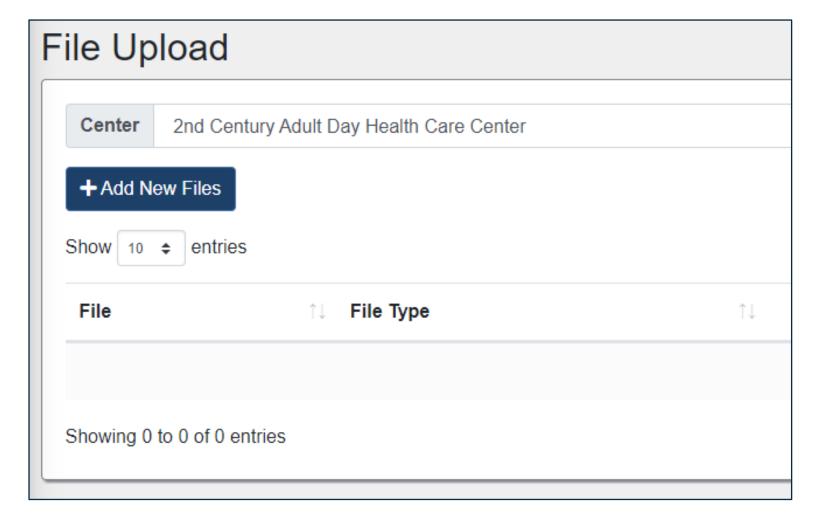
Upload to Peach

Email CDA staff member



Submitting the POC and Evidence to Peach Conterport AGING

California



Provider Responses Submitted - What's next?





If a POC response is deemed unacceptable:

Clarify statements

Five (5) business days to respond.

Back and forth until POC is approved.

Three (3) opportunities.

Directed Plan of Correction





CDA staff will follow up.



Steps to resolve all unapproved deficiencies.



Example: Evidence of job postings, hiring events, and job offers.



Failure to resolve areas of noncompliance may result in decertification.

Approved Plan of Correction





Approved POC



Administrator Submission Letter



Approval notification routed to CBAS certification team

Administrator Submission Letter



Dear CBAS POC Coordinator,			
I acknowledge that this Plan of Correction (POC) addresses the deficient practices identified in the most recent Statement of Deficiencies, CDA 2567, and complies with all related Medi-Cal certification requirements.			
The necessary corrective actions have been taken and the deficient practices have been resolved or will be resolved by the date indicated on the POC.			
Sincerely,			
Administrator	Date		
Center Name			

Summary









PLAN OF THE CORRECTION PROCESS AND COMPONENTS

STRATEGIES FOR A
SUCCESSFUL PLAN OF
CORRECTION

NAVIGATION OF THE PEACH PORTAL



CBAS Certification

Meet the CDA Certification Team





Alexis "Lexi" Granados Analyst



Sandra Dinong Analyst



Vacant Analyst



Ivan JaramilloManager

CBAS Certification





The certification team is informed of an approved POC.



Renewal application is finalized.



A recertification letter is issued to the provider.



Recertification is valid for 24 months.

Questions?

Please route questions related to Plans of Correction to CBASCDA@aging.ca.gov



Thank you for attending Secrets to Creating a Successful Plan of Correction