

Elements of a Plan of Correction

Include a Disclaimer at the beginning of the POC – Sample language:

This Plan of Correction constitutes this facility's written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet requirements established by state and federal law.

Elements of the POC

Corrective Action

Address how corrective action will be accomplished for those residents found to have been affected by the deficient practice.

- ⇒ What the corrective action was for the residents indicated in the deficiency (e.g. "Resident #1")
Note: If a resident has discharged, you simply state, "Resident #1 no longer resides in the facility."
- ⇒ Date of implementation & Who was responsible for making the corrections (position title)

Identification

Address how the facility will identify other residents having the potential to be affected by the same deficient practice.

- ⇒ How the facility determined if other residents were affected by the alleged deficient practice (assessments/evaluations, observations, audits, interviews, report reviews, etc.)
- ⇒ Who did the identification and when they did it

Systemic Action

Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur.

- ⇒ Detail the measures/actions taken, including Policy reviews/revisions
- ⇒ Systemic change, if needed, to prevent reoccurrence (based on root cause analysis)
- ⇒ Staff training/education – include specific content of information, training/education method, results of training (written post-test or skills checkoff), who is responsible for conducting the training, training date, required attendees
- ⇒ How the facility will ensure that all new staff receive the training/education
- ⇒ Provide the dates of measures/actions and the titles of staff completing them

Monitoring

Indicate how the facility plans to monitor its performance to make sure that solutions are sustained.

In your first deficiency, describe how your QAPI Committee Meetings are held - at what frequency, for what purpose, and using what methodology to ensure performance improvement is made. This makes it so you can reference the Committee and the process in all your other monitoring sections.

- ⇒ How the corrective actions will be monitored (audit tools, interviews, record reviews, etc.)
- ⇒ Who (what position) will be responsible for the monitoring methods
- ⇒ Frequency and quantity of monitoring
- ⇒ How the results will be evaluated and by whom (monitoring method should have a measurable outcome/goal)
- ⇒ How and when will findings be reported to the QAPI committee
- ⇒ Actions to be taken if results indicate desired outcome/goal is not being achieved or maintained