**SECTION I. DEMOGRAPHICS**

**DEMOGRAPHICS:**

- Complete the demographics section in full.
- If training is requested, please be specific about what your agency requires training about and when you feel the training should be completed in order to move forward with the rest of your Plan of Correction.

**SECTION II: ADW PLAN OF CORRECTION**

**Policy Section: Issue 1**

- If a specific policy section is cited on the monitoring tool, list in this section. If not cited, then mark N/A.

**Issue Found on Review (Include nurse monitor’s notes):**

- The nurse monitor who did your review writes notes specific to the problem found. Example: “risks not listed on the Service Plan”; “over 1/3 of total monthly time spent on incidentals”, etc.

**Describe how the noncompliance will be corrected:**

- In this, you will list what you did to address the specific problem found on the review. Examples: if the Personal Attendant spent more time cleaning the house and running errands than she did actually assisting the client with bathing, dressing, grooming, etc. then talk about what you did to specifically address that with the Personal Attendant or the way that PAL was written to fix that problem for that specific participant.

**Describe how future noncompliance will be prevented:**

- This area may include training for the staff at your agency so that they understand how to prevent future instances of noncompliance for the deficit identified. This area may also include an assessment on your part to determine why something was not done or not done correctly. There are three reasons that motivate people to not do what they
are supposed to do – lack of knowledge (can be addressed with training), lack of resources such as not enough time or lack of access to the correct tools (can be addressed by hiring more staff or making sure that all staff understand they must get all forms from the BMS website to ensure they are current), and finally lack of “want to” such as it is too hard to do it correctly and there have never been consequences for incorrect behavior (can be corrected with employee counseling and corrective action plans). Never assume that training will fix all noncompliance problems. You must correctly assess why something was not done before you can move on to prescribe a remedy to correct it.

Responsible Person:

• This is the person who will be responsible to make sure that the Plan of Correction is completed and turned in by the deadline. This person will also be the person who ensures that all items on the Plan are completed by the deadline and if not, will work on developing a new, reasonable deadline with OA nurse. This person will also be interacting with the OA nurse on a monthly basis to go over progress on the Plan and future ideas about how to re-evaluate the Plan if it is not working.

Implementation date:

• This is the date by which each goal is to be implemented by your agency. Example: if you determined that all of your Personal Attendant staff need to have a training to teach them the differences between incidental services and hands-on personal care assistance, you would list the date by which you feel you can complete all of that training.

Re-evaluation date:

• This is the date that you set to re-evaluate your plan for this goal. Did it work? Did it not work? In order to know if it did, you would look at the completed PAL’s for the last couple of months after completion of the training for your Personal Attendants. Did it reflect that the time they were taking to perform incidental services was less than 1/3 of the overall time they were spending with the participant? Was there no difference in how they were performing and they continued to devote 75% of the time to cleaning the participant’s house and to doing errands? If you find that it is not working, the expectation is that by this re-evaluation date, you will be able to speak with the OA nurse about developing a new plan that will be effective.