

Directed Plans of Correction

If your facility has received an enforcement letter requiring a Directed Plan of Correction from a Federal survey and you would like to work with Superior Health Quality Alliance (Superior Health), **please send an email to ddohm@metastar.com, jana.broughton@improve.health and patricia.leonard@improve.health and include in your email the following information:**

1. Centers for Medicare & Medicaid Services (CMS) Certification Number (CCN) for the facility.
2. Contact names, emails and best phone numbers for the facility leadership team that will be involved in completing the plan of correction.
3. A copy of the enforcement letter as well as the F tags from the 2567 included in the directed plan of correction: (F880, F884, F887).

Upon receipt of your email a quality improvement advisor from Superior Health will contact you via email and by phone.

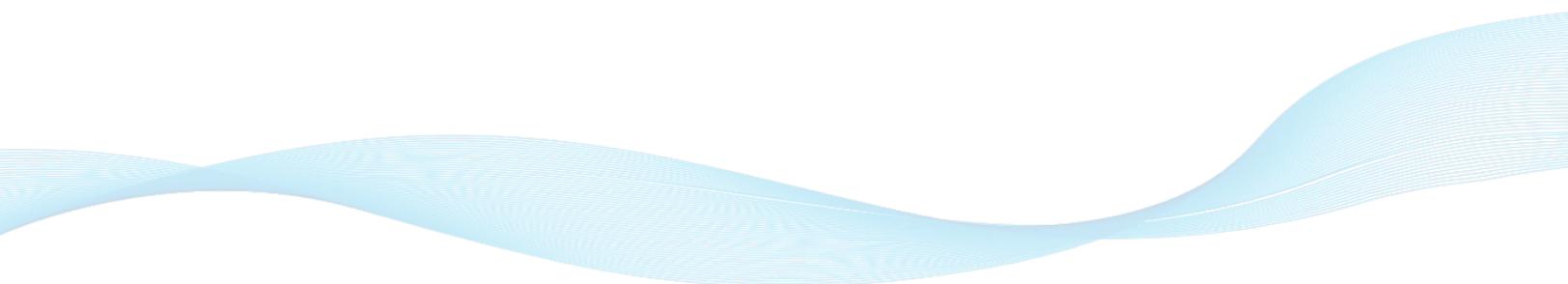
What does a Directed Plan of Correction (DPOC) supported by Superior Health include?

- Root cause analysis (RCA) using a five why or fish bone tool along with support for written summary.
- Developing a written action plan with interdisciplinary team.
- Education resources and assistance with developing an education plan.
 - Superior Health may provide virtual education assistance.
- Audit examples and support with audit development for improvement projects.
- Infection Prevention and Control Assessment and Response (ICAR) tool.
- Onsite infection control visit with nationally recognized infection preventionist.
- Ongoing review of audits and compliance data.

If a facility needs assistance writing or completing the plan of correction written document, Superior Health recommends partnership with a private consulting organization.

Responsibilities of the facility with a DPOC. This is what is completed post submission of original F tag for F880/F887.

1. Monitor all communications with the licensing team/survey if needed.
2. Delivery of recommended education either listed in the enforcement letter or those identified through the root cause discussion.
 - a. All staff must be educated prior to working with residents by the date you state your building will be in substantial compliance with F880.
 - b. A plan must be established to capture staff who are on leave or work very intermittently.
 - c. A plan to educate any contracted/agency staff should be included.
 - d. A post-test must be part of the education to validate competency and mastery of the information provided in the education.

- 
3. Schedule an ad hoc Quality Assurance and Performance Improvement (QAPI) meeting for an interdisciplinary team including medical director to review the RCA and action plan developed with Superior Health.
 4. Begin audit process for identified gaps in RCA to assure ongoing compliance is achieved and maintained.
 5. Assemble all documentation for submission to the state survey agency via directions from enforcement letter.
 6. Submit all documentation to the state survey agency per directions of enforcement letter/state survey agency.