

Plans of Correction



POC Overview

- Why
- Where
- When
- What
- Who



POC Why

- Mandated by CMS
- All but scope/severity of A or if past noncompliance
- Allegation of compliance

POC Where

- 2567
- ePOC – only way to submit
 - Ensure access
 - Multiple users

POC When

- Acceptable Plan
- 10 calendar days from notice of 2567
 - If not received, remedies can be imposed
- N/A for PNC or S/S of A
 - Still need to submit for all other Ftags
- Can start work on POC ASAP ie broken equipment

POC What

- Acceptable plan must Contain:
 - The plan of correcting the specific deficiency. The plan should address the processes that lead to the deficiency cited
 - The procedure for implementing the acceptable plan of correction for the specific deficiency cited
 - The monitoring procedure to ensure that the plan of correction is effective, and that specific deficiency cited remains corrected and/or in compliance with the regulatory requirements
 - The title of the person responsible for implementing the acceptable plan of correction.

POC What - Continued

- Acceptable plan must:
 - Address how corrective action will be accomplished for those residents found to have been affected by the deficient practice
 - Address how the facility will identify other residents having the potential to be affected by the same deficient practice
 - Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur
 - Include dates when corrective action will be completed. The corrective action completion dates must be acceptable to the State.

POC What - Continued

- If not acceptable by the State:
 - Facility will be notified
 - Notes section is very limited
 - Must resubmit POC
 - Will get notice when accepted
 - Facilities are ultimately accountable for compliance
 - Not alleviated based on communication of acceptable POC

POC Who

- Boots on the ground
- Get staff involvement
- Change is easier with buy-in

Acceptable plan must

- Correct the specific deficiency, what happened
 - Ask Why, “Why did the facility fail to...”
 - And then Ask Why again
- Implement POC
 - Who, How, When, What

Acceptable plan must

- Monitor for effectiveness – QAPI involvement
 - Audits – who, when, how, how often
 - Quantity and frequency should be appropriate for number effected
 - Do not state, “No NG tubes this week...”
 - Other ways to monitor

Acceptable plan must

- Address those affected
 - DPS
 - Read body
- Address others that may be affected
 - HOW the facility determined this
 - NG tubes, lifts, etc.
 - Same original interventions

Acceptable plan must

- Address **measures/changes** to be put into place
 - Systemic?
 - Policy?
 - Education?
 - Do not use cookie cutter approach:
 - I.e., review, educate, monitor – **THIS DID NOT WORK ORIGINALLY!!**

Acceptable plan must

- Include dates when completed
 - Should make sense
 - Acceptable to the State
 - X5 Date and POC date match
 - Multiple Cites: Compliance based on last date confirmed compliance
- Include who will complete it

Acceptable plan must

- When applicable, include DPOC
 - Read and follow the notice
 - Two separate steps

Life Safety Code Waivers

Types of Waivers

- Waivers
 - Continuing Waiver
 - Request needs to show two things
 - The waiver would not adversely affect patient/resident health and safety
 - It would impose an unreasonable hardship on the facility to meet specific LSC provisions
 - Temporary Waiver
 - Used when corrective action will take more than 60 days (or early DPNA)
 - What the corrective action will be
 - Measurable Milestones for the project
 - What interim life safety measures will be implemented while TW is in place
 - No authority to waive EP regulation

- Fire Safety Evaluation System (for use with Continuing Waivers-Annual)
 - Available for facilities that are surveyed as health care
 - Needs to be a complete evaluation of the entire facility
 - Needs to be done with every recertification survey
 - Facility can change
 - New deficiencies need to be addressed
 - Resident population changes
- Continuing Waivers/FSES
 - Reviewed and recommended for approval by the state agency before forwarded to **CMS for final approval**

Instructions for Requesting a Temporary Waiver in ePOC

- A Temporary Waiver (TW) may be requested for corrective action requiring more than 60 days from the exit date of the LSC Survey, in which the correction is clearly beyond the control of the facility/provider.
- A TW will not be recommended for a correction that could be made in a reasonable period of time (less than 60 days) or a correction that is clearly within the control of the facility/provider.

Include the following information in the ePOC text field in the appropriate K-tag

- The first paragraph must document to CMS, the justification that the unmet provision would not adversely affect the health and safety of the residents/staff of the facility.
- In the second paragraph CMS requires, a timetable with measurable milestone dates of major activities to correct the deficiency that the surveyor could monitor on any subsequent follow-up visit. Failure to follow the timetable and milestones established may result in enforcement actions.

Include the following information in the ePOC text field in the appropriate K-tag

- In the third paragraph CMS requires that when a TW of LSC requirements is in effect, the facility shall have increased fire safety awareness. This increased fire safety awareness may include the establishment of interim safety measures such as a Fire Watch, an increased number of fire drills, training of staff at the facility or other measures that would provide an increased measure of fire protection.
- ***TEMPORARY WAIVER EXPIRATION DATE:*** Enter the date in which the K-tag will be corrected and in full compliance in ePOC at the Completion X5 field

Include the following information in the ePOC text field in the appropriate K-tag

- NOTE: The TW should be requested for a reasonable period of time to complete all activities, including planning, design and plan review submittal/approval by the Bureau of Fire Services. BE SURE TO ALLOW SUFFICIENT TIME. If the correction is not made by the date entered in ePOC at the Completion X5 field, the TW will expire, you will be given no further opportunity to extend the TW and penalties may be imposed for items not corrected on the Completion X5 date or expiration date of the TW.
- *****REFER TO YOUR ENFORCEMENT LETTER FOR FURTHER INSTRUCTIONS.*****

TW instructions on LSC website

www.michigan.gov/lara/bureau-list/bsc/long-term-care-division/long-term-care-facilities/resources/lsc

POC reminders and tips

- Ask the why
- Must be in compliance with entire tag
- Effective Monitoring
- Communication – anything changes
- IDRs are separate from POCs
- CMS SOM can be found here: [100-07 | CMS](#)

