

**State Veterans' Homes (SVH) Corrective Action Plan**  
**MICHIGAN VETERAN HOMES CHESTERFIELD TWP: AUGUST 26-29, 2025**

The Corrective Action Plan (CAP) should include input from all levels of staff and affected resident(s), as is applicable and appropriate, impacted by the issue identified. This CAP is intended to become a source towards Quality Assessment and Assurance. Please reference VA GEC's CAP Standard Operating Procedure for detailed guidance on completing this CAP template.

State the Issue  Identify the Regulation Number and language only	Address how corrective action will be accomplished for those residents found to be affected by the deficient practice	Address how the SVH 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	How does the SVH plan to monitor its performance to make sure that solutions are sustained & what benchmarks will be used to determine sustainment	Proposed Completion Date
§ 51.120 (i) Accidents. The facility management must ensure that— (1) The resident environment remains as free of accident hazards as is possible; and (2) Each resident receives adequate supervision and assistance devices to prevent accidents.	The SVH has received and approved a quote from local vendor- Electronic Safety Inc. "ESI" that will complete the installation of an emergency call system in the public male and female restrooms in the main lobby.	The SVH identifies that (4) residents that independently ambulate and attend activities off the household have the potential to be affected while participating in a recreational and faith-related activity, placing them at risk for delay in assistance in the event of a medical emergency or fall.	Independent ambulating residents that attend activities in the main lobby/community center will be assisted by a staff member to the public restroom and be available for stand-by assistance. This will continue until the installation of the emergency call system is completed by ESI.	The QAPI committee has determined that designated staff will complete hourly-rounding starting 10/7/2025 on the public restrooms located in the main lobby to monitor for resident awareness and safety in the event a resident uses the public restroom. Rounding will continue until completion of the emergency call light system is installed by 10/31/2025. Following completion of system audits will be performed daily for two weeks for appropriate functioning and response of SVH personnel. Audits will be reviewed and continued 100% compliance has been met.	11/14/2025

- This Corrective Action Plan is to be electronically submitted to the Pod-specific National SVH Program Manager for Quality and Oversight
- In accordance with Section 163(c)(3) of the Joseph Maxwell Cleland and Robert Joseph Dole Memorial Veterans Benefits and Health Care Improvement Act of 2022, all SVH CAPs are required to be published to a publicly available internet website. Beginning with 2023 VA Surveys, each final, accepted CAP will be posted verbatim to a public-facing website.