

Developmental Disabilities Services

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Topic: Developmental Disabilities

Subject: HCBS Provider Plan for Correction Guidance Available for Residential Services Setting Providers

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children’s Intensive In Home Services |
| <input checked="" type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input checked="" type="checkbox"/> ODDS Children’s Residential Services | <input checked="" type="checkbox"/> Other (please specify): I/DD Licensing |
| <input checked="" type="checkbox"/> Child Welfare Programs | |

Message:

Information material is now available to assist providers in completing the “Provider Plan for Correction” portion of the “HCBS On-Site Compliance Assessments for Residential Services Settings” when providers/settings are found to be out of compliance with the new Home and Community-Based Services (HCBS) rules.

This document is available on the web, posted on the “Provider and Partner Resources” tab of the Office of Developmental Disabilities Services (ODDS) website: <http://www.oregon.gov/dhs/seniors-disabilities/DD/providers-partners/Pages/index.aspx> . It may also be found on the Home and Community-Based Services (HCBS) Website, at the following link: <http://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCBS/Pages/ODDS.aspx> .

Please share this guidance as a resource document to providers who must complete a “Provider Plan for Correction”.

The new Oregon Administrative Rules (OARs) related to HCBS can be found on-line at: http://www.dhs.state.or.us/policy/spd/rules/411_004.pdf

The HCBS On-Site Compliance Assessment for Residential Service Settings forms and instructions may be found at: <http://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCBS/Pages/ODDS.aspx>

If you have any questions about this information, contact:

Contact(s):	Rose Herrera/ Mariah Forrest		
Phone:	(503) 947-5201/ (503) 945-9815	Fax:	
Email:	Rose.K.Herrera@state.or.us / Mariah.Forrest@state.or.us		

Completing the Provider Plan for Correction

Home and Community-Based Services (HCBS) On-Site Compliance Assessments

How to complete the “Provider Plan for Correction” Section on the On-Site Compliance Assessment form:

If your assessment indicates that the home is out of compliance with the new Home and Community-Based Services (HCBS) rules, then you, as the provider, must complete a “Provider Plan for Correction”. This section must be completed for each area where the home is out of compliance. Use the narrative section on the form to identify your plan.

The Home and Community-Based Services Oregon Administrative Rules (411-004) can be found at: http://www.dhs.state.or.us/policy/spd/rules/411_004.pdf

The Centers for Medicare and Medicaid Services (CMS) expects milestone updates from states and the use of the on-site reviews and provider plans for correction help Oregon meet this requirement.

A sufficient plan for correction will include details that describe:

What action will be taken to come into compliance with the new HCBS rules

When the action will be completed

Who is responsible to complete the action

The actions and time frames described in the “Provider Plan for Correction” section of the On-Site Compliance Assessment will vary depending on the nature of what is not in compliance. Some corrections may be easy adjustments that can be done quickly such as removing posted visiting hours. Other corrections may be more complicated and take longer time to address.

For homes that are out of compliance because of restrictions on individuals to address health and safety, the “Provider Plan for Correction” will most likely reflect that “Individually-Based Limitations” will be implemented through the ISP planning process in 2017 as a corrective action. The plan for correction should identify what health and safety issue will be addressed by an Individually-Based Limitation and the “to be completed by” section should reflect the individual’s 2017 ISP renewal date. This should be done for each individual who requires a limitation.

More training and information related to Individually-Based Limitations will be available later in 2016. Individually-Based Limitations will be implemented throughout 2017.

- **When are “Provider Plan for Corrections” due? :**

Providers who were assessed from January through August 2016 are expected to submit a plan for correction by October 31, 2016. Providers reviewed on September 1, 2016 or later have 60 days from the date they receive their compliance assessment to create and submit their plan for correction.

The actions identified in the “Provider Plan for Correction” are not required to be complete when the plan for correction is submitted. The October 31, 2016 or 60 days following an on-site assessment deadline is the timeframe during which the provider must describe their plan of action to become fully compliant with HCBS regulations by September 2018.

- **How soon does a provider have to be in compliance? :**

Providers must be in full compliance with the HCBS rules by September 1, 2018. However, the Oregon Administrative Rules require that providers make measurable progress towards compliance throughout the transition process. Providers should identify in the plan for correction the specific target dates of when corrective actions are anticipated to be complete. A provider plan for correction that identifies a completion date of September 1, 2018 (such as a statement like “The provider will be in full compliance by September 1, 2018”) may be problematic as this does not indicate how measurable progress requirement in [OAR 411-004-0020\(6\)](#) is being met.

- **Will providers be penalized if they are found to be out of compliance with the new rules? :**

Providers will not receive fines or penalties if they are found to be out of compliance with the new HCBS rules during the transition period. The On-Site Compliance Assessments are being used to measure how providers are currently doing in comparison to the new rule requirements and to inform providers and services coordinators of what changes need to occur for a home to be fully compliant. The on-site assessments are not intended to be punitive. The on-site assessment are meant to be an informative tool.

- **To whom do I submit my provider plan for correction? :**

You will submit your “Provider Plan for Correction” to you licenser or certifier.

- **Where can I get help? :**

Your licenser or certifier is your local resource to assist you with your plan. Please contact your local office for assistance.

Additional resources can be found on Oregon’s HCBS website:

<http://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCBS/Pages/index.aspx>



Examples of Provider Plans for Correction

The following examples are intended as a guide to assist providers in completing the "Provider Plan for Correction". The situations below are not meant to be considered protocol or standard answers for similar situations. Provider plans for correction should be individualized by setting and individuals for whom they may apply. Answers may be succinct but must clearly identify the action to be taken and the date by which the action will be completed.

Example 1: The home is found to be out of compliance with the checklist question number 11: Each individual may have visitors of his or her choosing at any time (411-004-0020(2)(h))

Currently, the home has posted visiting hours in the home. Overnight guests have been disallowed or discouraged.

Provider plan for correction: The provider will remove posted visiting hours. Overnight guests will be allowed. The frequency of overnight guests will be addressed in the Residency Agreement.

To be completed by: Remove visiting hours- immediately (6/30/16); Allowance of overnight guests- immediately (6/30/16); Residency Agreement (12/31/16).

Example 2: The home is found to be out of compliance with the checklist question number 11: Each individual may have visitors of his or her choosing at any time (411-004-0020(2)(h))

Currently, an individual who resides in the home has court restrictions that prohibit contact with minors.

Provider plan for correction:

Individually-based limitation is anticipated for individuals who have been limited by the provider in having visitors of their choosing at any time.

To be completed by: 5/15/17—Restrictions due to legal orders and sex offending risk to the community will be addressed in the individual's ISP through an Individually-Based Limitation.

Example 3: The home is found to be out of compliance with checklist question number 13. Each individual has the freedom and support to have access to food at any time (411-0040-0020(2)(j)).

Currently, the home has a locked fridge and pantry to secure the food of the provider and other household members.

Provider plan for correction:

Individually-based limitation is anticipated for individuals who have been limited by the provider in having access to food at any time.

Other: For the individuals in the household who do not need a limitation, an alternate storage space will be arranged by the provider. One individual will have a mini-fridge in his bedroom to allow unrestricted access to personal foods. This individual will purchase his own mini-fridge. Another individual will have dry storage available in their bedroom. The provider will provide a storage bin and help the individual to designate a space. The provider will also help the individual with ongoing support such as cleaning and monitoring storage.

To be completed by: Individually-Based Limitation—9/1/17 (Restrictions will be addressed through the individual's ISP in 2017 to address compulsive food seeking behavior combined with aspiration risk); Mini-fridge—10/31/16; Dry storage—9/30/16

Example 4: The home is found to be out of compliance with checklist question number 6.

The unit is a specific physical place that may be owned, rented, or occupied by an individual under a legally enforceable Residency Agreement (411-004-0020(2)(c)).

Currently, the home does not have Residency Agreements in place for individuals residing in the home.

Provider plan for correction:

The provider will provide Residency Agreements to individuals at their ISPs so that the individual may have the support of their team in understanding the document and policies. If new residents move into the home, the Residency Agreement will be made available by the provider upon move in.

To be completed by: 11/1/16- Individual 1 (ISP date); 12/20/16- Individual 2 (ISP date); 2/10/17- Individual 3 (ISP date);

Example 5: The home is found to be out of compliance with checklist question number 8.

Units must have entrance doors lockable by the individual, with the individual and only appropriate staff having a key to access the unit (411-004-0020(2)(e)).

Currently, individual's bedroom doors do not have locks available.

Provider plan for correction:

- Individually-based limitation is anticipated for individuals who do not have a lock on their bedroom door.
- Other: One individual in the home will have a lock that is disabled due to self-injurious behavior. This restriction will be addressed during the individual's ISP planning process and there will be an individually-based limitation. The provider will also install locks for the other two individuals in the home. The provider is researching locking types and will need to arrange for the installation of a lock. The individuals who will have active locks on their doors will have support addressed in their ISP (proactive strategies for managing the key and training for using the exterior locking feature).

To be completed by: 7/1/17- Individually-Based Limitation for Individual 1 (ISP date);
2/28/17- Locks will be installed for Individual 2 and Individual 3.

Completing the Provider Plan for Correction

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