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Health Care Regulation and Quality Improvement Section
Health Facility Licensing and Certification Program
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Nurse Staffing Reports: Plan of Correction Guidance

This memo provides additional information about Health Facility Licensing & Certification (“Agency”) reports and the Plans of Correction described in Oregon Administrative Rules (OAR) 333-501-0035 and 333-510-0040.

Topics covered include:

[What happens after a survey or complaint investigation?](#)

[About Plans of Correction;](#)

[Plan of Correction Conference Calls;](#)

[Plan of Correction Review;](#) and

[Preparing for surveys and complaint investigations.](#)

What happens after a survey or complaint investigation?

The hospital and nurse staffing committee cochairs receive a written report documenting any noncompliance. Each citation includes the legal standard, a deficiency statement and findings of fact that support the noncompliance determination.

Key Facts:

- The agency issues a nurse staffing survey or complaint investigation report no more than 30 business days after the survey closes.
- The agency sends the report to the hospital administrator and both cochairs of the hospital nurse staffing committee.
- The report includes a cover letter that explains whether the hospital is required to submit a plan or correction after receiving the agency’s report.

About Plans of Correction:

A hospital must write a Plan of Correction (POC) if the agency's nurse staffing survey or complaint investigation report identifies noncompliance. If you are having problems completing the POC before the deadline, please contact mailbox.nursestaffing@odhsoha.oregon.gov for a possible extension.

Key Facts:

- The hospital must submit a POC no more than 30 business days after it receives the agency's report.
- The POC must include the first page of the agency's report. This page must be signed by the hospital administrator.
- The hospital may involve the nurse staffing committee to assist in finding and implementing solutions to the deficiencies.
- The POC must respond to each deficiency identified in the agency's report. Each response should include:
 1. A detailed description of how the hospital plans to correct the deficiency identified in each deficiency statement;
 2. A description of how the hospital will implement the plan to correct the deficiency;
 3. A timeline or date by which the hospital expects to implement the corrective actions;
 4. The description of monitoring procedure(s) that the hospital will perform to prevent a recurrence of the specific deficiency identified; and
 5. The title of the person who will be responsible for implementing the corrective actions described.
- The POC should not attempt to disprove the findings.
- The POC should not restate a statute or administrative rule as the proposed solution.

Plan of Correction Conference Calls:

The agency hosts conference calls with hospitals to discuss areas of concern regarding the report or formulating a POC. Conference calls should include those who will draft the POC; staffing committee co-chairs and the CNO may also benefit from participating. Participants will want to have the report and any POCs on hand during the call. To request a POC conference call email mailbox.nursestaffing@odhsoha.oregon.gov.

EXAMPLE

PRINTED:
FORM APPROVED

Health Care Regulation and Quality Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
NAME OF PROVIDER OR SUPPLIER		STREET ADDRESS, CITY, STATE, ZIP CODE		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 602	<p>OAR 333-510-0045 (2) Anti-Retaliation Notice</p> <p>(2) A hospital shall also post an anti-retaliation notice on the premises that:</p> <p>(a) Summarizes the provisions of ORS 441.181, 441.183, 441.184 and 441.192;</p> <p>(b) Is clearly visible; and</p> <p>(c) Is posted where notices to employees and applicants for employment are customarily displayed.</p> <p>Stat. Auth.: ORS 413.042, 441.155, 441.169, 441.173 & 441.185</p> <p>Stats. Implemented: ORS 441.155, 441.169, 441.173 & 441.185</p> <p>This Rule is not met as evidenced by: Based on observation and interview it was determined the hospital failed to ensure it posted the anti-retaliation notice in places where employees and applicants for employment would be likely to view and read it.</p> <p>Findings include:</p> <p>1. During tour of the hospital on [REDACTED] beginning at [REDACTED], there were no observations of the anti-retaliation notice posted on the bulletin board where other notices for employees were posted.</p> <p>2. During interview with [REDACTED] on [REDACTED] at [REDACTED] he/she stated that all individuals apply for employment online. During review of [REDACTED] website [REDACTED] the anti-retaliation notice was not observed on the website and [REDACTED] stated that it was not posted online.</p>	E 602	<p>E602 Plan: <i>The provider writes a detailed description here of how the hospital plans to correct the deficiency identified in the deficiency statement.</i></p> <p>Implementation: <i>The provider describes how the hospital will implement the plan to correct the deficiency.</i></p> <p>Implementation Date: <i>The provider includes the timeline or date by which the hospital expects to implement the corrective actions.</i></p> <p>Monitoring: <i>The provider describes what regular monitoring the hospital will do to prevent the deficiency from recurring.</i></p> <p>Responsible party: <i>The provider lists the title of the person who will be responsible for implementing the corrective actions.</i></p>	

Rule text

Deficiency statement

Findings

Plan of Correction Review:

The agency issues a written determination stating whether the hospital's POC is sufficient no more than 30 business days after receiving it. If the agency does not approve the hospital's POC, the hospital must submit a revised POC no more than 30 business days after receiving the agency's determination.

If the agency approves the hospital's POC, the hospital must implement the approved POC no more than 45 business days after receiving the agency's determination.

Preparing for surveys and complaint investigations:

There are many ways to prepare for surveys and complaint investigations. Some successful short-term solutions include:

- Gather documents that are not-unit specific (i.e. hospital nurse staffing committee minutes, charter, roster, hospital-wide nurse staffing plan, etc.);
- Confirm hospital nurse staffing committee cochair availability for interviews;
- Designate a space that surveyors can use as a work area while they are on-site; and
- Schedule post-survey and post-report debrief meetings with the hospital nurse staffing committee.

Some successful long-term solutions include:

- Orient hospital nurse staffing committee members using archived webinars at www.healthoregon.org/nursestaffing;
- Run a mock survey using the survey tools available at www.healthoregon.org/nursestaffing;
- Contact the mailbox.nursestaffing@odhsoha.oregon.gov with any nurse staffing questions; and,
- Document compliance with nurse staffing requirements.