

Hubbard County
Corrective Action for Waiver Review Initiative

I am writing in response to your report from the Waiver Review Site Visit to Hubbard County in May of 2013. We appreciate the feedback in this report as well as when you were on site. The case managers and I were apprehensive about this visit, but it proved to be helpful and a very positive learning experience. We particularly appreciate the positive approach that your team takes and your focus on our county's strengths. Below are the Corrective Action Requirements that Hubbard County completed immediately upon audit completion and will continue to review on a continual basis.

Waiver Review Site Visit: May 2013
Report Issued: July 2013

<p>Beginning immediately, include a back-up plan of all CADI and BI participants. All CCP care plans must be updated with this information. This is required for all CCP programs to ensure health and safety needs are met in the event of an emergency. The back-up plan should include 3 elements: 1)the participant's preferred admitting hospital, 2)emergency contact in event that primary caregiver cannot be reached during an emergency, and 3) back-up staffing plans in event that primary staff are unable to provide needed services.</p>
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Training and discussion was completed immediately with all staff regarding the need to include documentation of the Back-Up Plan and attach it to the care plan. This had been required to be included in all case files but had been missed in several BI and CADI files. Some of the files that were audited included partial back-up plan documentation but not all 3 elements were addressed. The files in question have been corrected as of July 23, 2013. The Emergency Back-Up Plan found in the DSPM for Waivered Services is the Plan that is included in all DD case files and will be used through all Waivered Service case files upon assessment or reassessment.

Beginning immediately, ensure that each participant case file includes signed documentation that participants have been informed of their right to appeal on an annual basis. It is required that all HCBS participants have a completed documentation of their informed right to appeal in the case file.

All of the clients receive the appeal information upon opening a case, and case managers are now more aware of the need for this to happen on an annual basis. The case managers receive signatures to this affect. Training and discussion was completed immediately with all staff regarding the need to include this documentation in the case file. If the client is unable to sign this documentation, the case manager is ensuring that the guardian is receiving this information and that they are signing to the effect. All items were corrected as of July 23, 2013 and signed documentation that participants have been informed of their right to appeal is received upon assessment or reassessment.

Submit the Case File Compliance Worksheet within 60 days of the Waiver Review Team's site visit.

The Case File Compliance Worksheet was submitted June 20, 2013. There were some items that needed further clarification. Following phone calls and e-mails, the final submission was provided July 23, 2013

I understand that my e-mail submission of this plan constitutes my approval of this plan:

Social Services Supervisor : Michelle J Fischer

Date: August 14, 2013