

### Corrective Action Requirements

Required corrective actions are developed by the Waiver Review Team, and are areas where Hennepin County was found to be inconsistent in meeting state and federal requirements and will require a response by Hennepin County. Follow-up with individual participants is required for all cases when noncompliance is found. Correction actions are only issued when it is determined that a pattern of noncompliance is discovered and a corrective action plan must be developed and submitted to DHS. The following are areas in which Hennepin County will be required to take corrective action.

1. **Beginning immediately, ensure that LTCC assessments for CCB and Elderly programs occur within 20 days of referral. As of August 1, 2012, MN Statute 256B.0911 requires that LTCC assessments be conducted within 20 days of the request. Twenty-seven percent (27%) or 87 out of 318 assessments for new CAC, CADI and BI participants and 52% or 157 out of 303 assessments for new EW and AC participants occurred within this timeframe. When at least 80% of screenings are occurring within this timeframe, it is considered evidence of a compliant practice.**

County response: We are committed to meeting this timeline. Increasing demand with limited staffing capacity had created a challenge to providing LTCC community requests within 20 days. The county recently hired 24 additional assessors to bring us into compliance with state requirements. The 24 new assessors are now trained and responding to initial community based requests for LTCC. We are on our way to eliminating the waiting list and have a plan to meet the timelines for LTCC assessments. In addition we are evaluating our work flow and determining options for increasing the number of assessments each assessor can reasonably accomplish each week.

2. **Beginning immediately, ensure that care plans for HCBS participants in all programs include the required documentation of services to be provided, participant needs, health and safety issues, and outcomes and goals. All care plans must be updated with this information. Nine of 94 CADI care plans, five of 55 BI care plans, eight of 76 EW care plans, 24 of 77 AC care plans, and one of 93 DD care plans did not include documentation of services to be provided. Four of 30 CAC care plans, 12 CADI care plans, five BI care plans, eight EW care plans, 19 AC care plans, and one DD care plan did not include documentation of participant needs. Two CAC care plans, 16 CADI care plans, five BI care plans, 12 EW care plans, 22 AC care plans, and one DD care plan did not include documentation of participant health and safety issues. Six CADI cases, four EW cases, 11 AC cases, and one DD case did not include documentation of participant outcomes and goals. The care plan is the one document that all participants receive. Therefore, it must include information about the participant's needs along with which services, formal or informal, will be provided to address those needs, the participant's health and safety issues, and goals and outcomes for their involvement with home- and community-based services.**

County Response: Building upon the training provided to the recently hired 24 assessors, all other LTC and DD case managers will receive training on the development of the Community Support Plan (for LTC) or Individual Support Plan (for DD) and person centered goals this summer. The training will include: (a) development of goals based on client needs and strengths, (b) health and safety issues, (c) continue the conversation and expectation that goals are person centered (d) incorporating indicators and outcomes which are to be associated with the client goal. Case audit processes for both operated and contracted waiver case management will target these requirements.

3. **Beginning immediately, ensure that case files include the Related Condition Checklist for all DD participants with a related condition. It is required that participants have this signed documentation in their case file to confirm eligibility for DD case management for a person with a condition related to a developmental disability on an annual basis. Three out of 11 DD cases reviewed with a related condition did not have complete and current documentation in the file.**

County Response: Existing DD case audits have been moved up from every six months to quarterly and will include the Related Conditions Checklist. Staff training next month will include this requirement, including DD CDCS cases.

4. **Beginning immediately, include a back-up plan in the care plan of all CAC, CADI, and BI participants. All CCB care plans must be updated with this information. This is required for all CCB programs to ensure health and safety needs are met in the event of an emergency. The back-up plan should include three 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. Currently, two CAC cases, eleven CADI cases, and one BI case did not include any required elements. Four CAC cases included partial back-up plan documentation meaning the plan included one or two, but not all three required elements.**

County Response: The current CSP for Hennepin County has an emergency back-up plan that includes: (a) admitting hospital and physician, (b) emergency contact, (c) listing a second contact beyond the emergency contact. We will incorporate into our emergency back-up plan a back-up staffing plan when client is assessed to need critical and essential services. The changes and updates to the emergency back-up plan will be announced and discussed as part of the training this month and future trainings. A case audit process is being developed that will include the emergency back-up plan requirement.

5. **Beginning immediately, case managers must conduct face-to-face visits with participants as required in the federally approved DHS waiver plans. DD waiver participants must have a documented face-to-face visit by the case manager every six months. However, 62 of 93 DD cases reviewed (66.7%) had case manager visits less frequently than on a biannual basis.**

County Response: Staff training next month will emphasize the requirement of completing the visits every six months. Staff will be engaged in developing strategies to achieve compliance.

Starting in July, 2013 the on-going DD case audit process will include the six month visit requirement.

6. **Beginning immediately, ensure that each participant case file includes signed documentation that participants have given informed consent to release private information. It is required that all HCBS participants have a completed documentation of informed consent included in their case file. Ten out of 93 DD cases, four out of 76 EW cases, three out of 77 AC cases, two out of 94 CADI cases, and one out of 30 CAC cases did not have completed documentation in the case file. In addition, 15 out of 93 DD cases, two out of 76 EW cases, five out of 77 AC cases, seven out of 94 CADI cases, five out of 30 CAC cases, and four out of 55 BI cases did not have documentation that the participant had given informed consent to release private information within the past year.**

County Response: All staff will receive training this summer to emphasize the requirement for signed documentation that clients have given informed consent to release private information. This will be in addition to the annual mandatory training on data practices that all Hennepin HSPHD employees already complete annually.

At times, the only contact we have is with contracted waiver providers therefore, a separate consent to release information form would not be found in those files. Hennepin County believes we are currently in compliance with statutes related to sharing information with providers contracted for any waived services.

The Minnesota Government Data Practices Act, Minn. Stat. 13.46, subd. 1 (c), includes in the definition for welfare system, entities under contract with the county social service and welfare agencies. Subd. 2 (a)(5) and (7) of the statute allow the sharing of data within the welfare system. For waiver cases, the providers are all under contract with the county agency and therefore a part of the welfare system as defined in the statute cited above. For this reason, the files will not contain a consent to release information to these entities, and further, the clients will have signed for the receipt of the privacy notice.

Hennepin County HSPHD clients receive the Notice of Privacy Practices and their right to confidentiality as required by Minn. Stat. 256B.0911, subd. 3a(h)(7) and chapter 13. This is evidenced by the client's signature of receipt contained in the CSP and ISP which is in the client record. The language on both the signature pages for the CSP and the ISP states, "I received a copy of the HSPHD Notice of Privacy Practices."

7. **Beginning immediately, ensure that all participants have an individual care plan that is current within the past year included in their case file. All care plans must be completed on at least an annual basis. Currently, there are fifteen waiver participants who do not have a current care plan in their case file including one out of 30 CAC cases, four out of 94 CADI cases, one out of 55 BI cases, three out of 76 EW cases, three out of 77 AC cases, and three out of 93 DD cases.**

County Response: All staff will receive training this summer that will re-emphasize the critical importance of timely, completed plans being on file. Case file audit processes for both county operated and contracted case management will target this requirement.

- 8. Submit the Case File Compliance Worksheet within 60 days of the Waiver Review Team's site visit. Although it does not require Hennepin County to submit a Correction Action plan on this item, a prompt response to this item is required. The Case File Compliance Worksheet, which was given to the County, provides detailed information on areas found to be non-compliant for each consumer case file reviewed. This report required follow up on 176 cases. All items are to be corrected by Monday, April 1, 2013 and verification submitted to the Waiver Review Team to document full compliance.**

County Response: All documentation for contracted cases was delivered to DHS on April 1, 2013. Following an extension granted by DHS, all documentation for operated cases was delivered on April 10, 2013.