

Wadena County Human Services (WCHS)
Response to Waiver Review Project
Corrective Action Requirements
January 21, 2013

Corrective Action Plan Required

- 1. Beginning immediately, ensure that LTC screenings for CCB 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. Seventy-one percent (71%) or 12 out of 17 assessments for new CAC, CADI and BI participants occurred within this timeframe. When at least 80% of screenings are occurring within this timeframe, it is considered evidence of a compliant practice.**

Action Plan:

WCHS has instituted protocols within the intake process to clearly define a call for information from an actual request for service. Protocols have also been improved upon to ensure all intakes are being opened and/or closed. If tardiness of LTC screening is unavoidable, case managers will enter an explanation into the actual assessment – MN Choices will provide drop down options – and into MMIS under case manager comments.

- 2. Beginning immediately, ensure that all care plans include documentation of participant choice in their care planning. Currently, the CDCS care plan used by Wadena County does not include documentation of participant choice. As a result, one out of two CAC cases and two out of eight CADI cases did not include documentation of participant choice in the care plan. In addition, one DD screening document was not signed by the participant or legal representative and therefore did not include participant choice. In addition, the county should ensure that all care plan formats include all required elements, which may vary from waiver to waiver. For example, a CAC participant with a CDCS care plan must also have a CAC application/reassessment form must be included in their case file.**

Action Plan:

WCHS has reviewed with each case manager the necessity of reviewing participant choice and obtaining the consumer's signature. Since each CDCS consumer may utilize different variations of the CDCS plan, the case manager will ensure documentation of participant choice/client rights and signature has been attached to the plan. A case file checklist has been developed to

ensure this practice is implemented amongst all case managers and each waiver case contains all required elements.

- 3. Beginning immediately, include a back-up plan in the care plan of all CAC, CADI and BI participants. All CCB care plan 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, one out of eight CADI cases did not include a back-up plan, and one out of two CAC cases, four out of eight CADI cases, and two out of two BI cases included partial back-up plan documentation meaning the plan included one or two, but not all three required elements.**

Action Plan:

To assure compliance, WCHS has revised the back-up plan template to include all three required elements. Back-up plan is printed on colored paper so it can easily and quickly be referred to in the case of an emergency. Printing on colored paper also ensures all case managers (waiver and non-waiver) can identify the document in the absence of the current worker. Case files are randomly reviewed one time per month by supervisor and at monthly program meetings.

- 4. Beginning immediately, ensure that each participant's 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 included in the case file. One out of two CAC cases, two out of eight CADI cases, seven out of ten EW cases, one out of eight AC cases, and two out of eight DD cases did not have documentation in the case file showing that participants had been informed of their right to appeal. In addition, five out of eight CADI cases, two out of two BI case, one out of ten EW cases, and six out of eight AC cases did not have documentation that the participant had been informed of their right to appeal within the past year.**

Action Plan:

To assure compliance, WCHS has inserted this required document into all opening packets and onto each case file checklist. Case files are randomly reviewed one time per month by supervisor and at monthly program meetings. Checklists are reviewed to ensure all required documentation has been included in the file.

5. **Beginning immediately, ensure that each participant case file includes signed documentation that participants have been informed of the county's privacy practices in accordance with HIPPA on an annual basis. It is required that all HCBS participants have signed documentation in their case file stating that they have been informed of the county's privacy practices on an annual basis. Currently, one out of two CAC cases, three out of eight CADI cases, one out of two BI cases, three out of ten EW cases, and one out of eight AC cases included partial documentation in the case file meaning the privacy practices document did not include both a participant or legal representative signature and date. In addition, one out of ten EW cases and one out of eight AC cases did not have documentation that the participant had been informed of the county's privacy practices in accordance with HIPPA within the past year.**

Action Plan:

To assure compliance, WCHS has inserted a signature and date line to the privacy practices document. All opening packets have been updated to include the most current privacy practices document. WCHS has reminded all case managers to obtain a signature and date from either the consumer or the legal representative.