



HIV Care Unit Corrective Action Plan Policy

Identifying Findings

During a subrecipient site visit, staff from the Communicable Disease Harm Reduction Section (CDHR) will review information from several sources:

- Subrecipient's written responses to questions on how the subrecipient meets monitoring standards
- Documents submitted by the subrecipient to show compliance with monitoring standards
- Verbal responses to discussion questions
- Verbal responses to clarification questions from written responses
- Client records
- Fiscal records

Definition

Based on information from the above sources, CDHR staff will identify any findings. **A finding is** a situation where CDHR staff have, based on the information presented to them, determined that the subrecipient is not in compliance with the federal Ryan White requirements as outlined in [Ryan White Legislation](#), [Policy Notices](#), [Program Letters](#), and [National Monitoring Standards](#); the [Wisconsin Universal Standards of Care for Ryan White Part B Subrecipients](#); the [Wisconsin Ryan White Part B Services Standards of Care](#); or other requirements of the CDHR HIV Care Unit specified in the Grant Agreement Scope of Work. A finding requires a corrective action plan.

Less commonly, findings may be identified outside of site visits based on information gathered during routine monitoring activities, such as periodic monitoring calls, grievance appeals, routine reports, or information from clients or subrecipients.

What is *not* a finding?

- **Minor record discrepancies or missing information:** Some discrepancies in a client record or missing information from a small number of client records are expected as part of the nature of human services work.
- **Minor lapses in documentation:** Isolated examples of missing, late, or inaccurate documentation, as long as they do not substantially impact client care or represent a larger systemic issue, are not considered findings.
- **Missing documentation that has been vigorously pursued:** Missing documentation is not considered a finding or a deficiency if the HIV care provider vigorously pursued the required documentation and documented attempts to gather this information.

Types of findings

Findings fall into two categories: **standard** findings and **significant** findings.

A **standard finding** requires:

- **Corrective action plan:** The subrecipient must **prepare a corrective action plan within 45 calendar days** of receiving notice of the finding.
- **Implementation of the plan:** The subrecipient must **fully correct** the finding **within one year** of receiving notice of the finding.

Examples

- Lack of compliance with federal regulations or CDHR policies.
- Systemic lack of required documentation.

A **significant finding** requires:

- **Corrective action plan:** The subrecipient must **prepare a corrective action plan within 30 calendar days** of receiving notice of the finding.
- **Progress report on the plan:** The subrecipient must **submit a progress report** describing progress made on the corrective action plan **within 60 calendar days** of receiving notice of the finding.
- **Implementation of the plan:** The subrecipient must **fully correct** the finding within **120 calendar days** of receiving the finding.

In extreme cases where the significant finding impacts client care, the CDHR reserves the right to shorten the timeline for addressing the finding.

Examples

While it is not possible to outline all conceivable situations that are considered significant findings, below are some of the factors that would elevate a situation from a standard finding to a significant finding:

- A policy decision or series of decisions that are expressly against Ryan White or CDHR policies and result in significant client harm.
- Subrecipient inaction or failure to provide a reasonable expected level of care that resulted in significant client harm.
- A system failure or systemic deficiency resulting in significant client harm.
- Falsifying information.
- Failure to disclose a situation that is required to be disclosed to the CDHR by either HIV Care Standards or the subrecipient's contract, such as a data breach or a client appeal of a grievance decision.
- A standard finding previously identified where the subrecipient has made little to no progress to address the finding in the required timeframe.

Approval and Implementation of the Corrective Action Plan

The corrective action plan will be submitted in a format determined by the CDHR and must include all elements and information requested by the CDHR.

Plan review

1. After a corrective action plan is submitted, CDHR staff will review and either accept the plan or return the plan to the subrecipient for revisions.
2. Subrecipients will be informed whether the plan is accepted or must be revised within 10 business days of submitting the plan to the CDHR.
3. This process will be repeated until the CDHR accepts the corrective action plan.

Resolution Deadline

Returning a corrective action plan for revision does not impact the deadline for resolving the finding. Regardless of when the action plan is approved and the number of rounds of revision, standard findings must be resolved within one year of receiving notice of the funding and significant findings must be resolved within 120 days of receiving notice of the finding.

Implementation monitoring

- **Monthly calls:** Any subrecipient on a corrective action plan will be placed on a monthly monitoring call schedule, if the subrecipient is not already on that schedule. At each monthly call, the subrecipient is expected to verbally report on progress for each finding.
- **Bi-annual reporting:** The subrecipient must submit a written update on each unresolved finding six months after the corrective action plan is approved, and then every six months until all findings are resolved.

Resolution

When all findings are successfully resolved to the satisfaction of both parties, the subrecipient and the CDHR will sign off the completed corrective action plan. At the next monitoring site visit, CDHR staff will follow up to verify that all findings have been addressed. If a standard finding was reported as resolved and is found at the site visit to not be resolved to the extent reported on the corrective action plan updates, it will be reopened as a significant finding.