State Veterans' Homes (SVH) Corrective Action Plan Baldomero Lopez State Veterans' Nursing Home, September 24-27, 2024

The Corrective Action Plan (CAP) should include input from all levels of staff and affected resident(s), as is applicable and appropriate, impacted by the issue identified. This CAP is intended to become a source towards Quality Assessment and Assurance. Please reference VA GEC's CAP Standard Operating Procedure for detailed guidance on completing this CAP template.

| State the Issue Identify the Regulation Number and language only | Address how corrective action will be accomplished for those residents found to be affected by the deficient practice | Address how the SVH will identify other residents having the potential to be affected by the same deficient practice | Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur | How does the SVH plan to monitor its performance to make sure that solutions are sustained & what benchmarks will be used to determine sustainment | Proposed Completion Date |
|---|--|---|---|---|--------------------------------|
| § 51.110 (e) (3) Comprehensive care plans. The services provided or arranged by the facility must— (i) Meet professional standards of quality; and (ii) Be provided by qualified persons in accordance with each resident's written plan of care. | Resident # 16 G-tube (Gastrostomy) placement was verified during survey. LPN A received training on G-tube placement prior to administration of medication during survey and 11/13/2024. | All residents who have a gastric tube have the potential to be affected. G-Tube placement training was provided to LPN A 11/13/24. The licensed nursing staff have been provided with G-tube placement verification training by 11/30/24. | | The Nursing Supervisors/designee will conduct G-Tube placement observations for nurses to validate competency completed by 11/22/2024. The Nursing Supervisors/designee will conduct G-tube placement observations using <i>Enteral Medication Administration</i> <i>Competency Form</i> three times weekly for 4 weeks for licensed staff. The Nursing Supervisors/designee will conduct G-tube placement observations using <i>Enteral Medication Administration</i> <i>Competency Form</i> one weekly for 4 weeks for licensed staff. The Nursing Supervisors/designee will conduct G-tube placement observations using <i>Enteral Medication Administration</i> <i>Competency Form</i> one weekly for 4 weeks for licensed staff. | 02/01/2025 |

• This Corrective Action Plan is to be electronically submitted to the Pod-specific National SVH Program Manager for Quality and Oversight

• In accordance with Section 163(c)(3) of the Joseph Maxwell Cleland and Robert Joseph Dole Memorial Veterans Benefits and Health Care Improvement Act of 2022, all SVH CAPs are required to be published to a publicly available internet website. Beginning with 2023 VA Surveys, each final, accepted CAP will be posted verbatim to a public-facing website.

| | | Competency Form monthly. |
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| | | The results of this competency will be reported to the monthly Quality Assurance Performance Improvement (QAPI) for 3 months. With an expected benchmark of 95% compliance. At which time the QAPI team will convert to a quarterly G-tube placement observation to verify continued compliance. |
| | | The pharmacist/designee will conduct random medication administration pass observations for use of proper G-Tube placement for licensed nursing staff to ensure competency monthly. |
| | | The Director of Nursing/designee will conduct random observations for use of proper G-Tube placement technique for licensed nursing staff to ensure monthly competency and report findings to the monthly QAPI meeting. |

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