

**State Veterans' Homes (SVH) Corrective Action Plan**  
**Sitter & Barfoot Veterans Care Center 11/5/24-11/8/24**

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
<b>§ 51.70 (c) (5) Conveyance Upon Death –</b> Upon the death of a resident with a personal fund deposited with the facility, the facility management must convey within 90 calendar days the resident's funds, and a final accounting of those funds, to the individual or probate jurisdiction administering the resident's estate; or other appropriate individual or entity, if State law allows. The facility failed to conduct a timely final accounting upon the death of a resident with funds deposited in a trust account for one resident.	Residents #27's Family/representative was contacted 11/6/24 and it was discussed the need to close the account and deposit the check the facility had given the family/representative within the 30 days of resident's death. The family/representative deposited the check that day (11/6/24), and the account was closed.	Any resident that expires in the facility or is permanently discharged from the facility has the potential to be affected.	A resident that expires in the facility, or is permanently discharged, will have their personal funds returned to the appropriate person/entity within 30 days. The Business Office Manager or designee will monitor to make sure the checks have been cashed/deposited by the appropriate person/entity within the 90 days to ensure the account can be properly closed. If the Business Office Manager sees the time frame is coming close to the 90 days, and the check has not been cashed/deposited, a phone call will be placed to remind the appropriate person/entity to cash/deposit the check. A note of this notification will be made as needed.	Business Officer Manager or designee will review the discharged resident list twice a month (to start 12/16/24) to capture accounts that need to be closed within the 30 days, with a goal of being 90% compliance. This process will be on going. The Business Office Manager or designee will review outstanding checks not deposited/cashed and place a call if warranted to ensure checks get processed before the 90 days. This process will be ongoing. The Business Office Manager or designee will review these reconciliations with the Administrator or designee monthly for the next 3 months.	4/1/2025

- 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.

<p><b>§ 51.210 (h)</b></p> <p><b>Use of outside resources –</b></p> <p>If the facility does not employ a qualified professional person to furnish a specific service to be provided by the facility, the facility management must have that service furnished to residents by a person or agency outside the facility under a written agreement. The facility failed to obtain a sharing agreement that governed mental health services provided to three residents by the VAMC.</p>	<p>This sharing agreement was asked for by the SVH over a year ago and has been at the VAMC in preparation and review for over a year. An email was sent 12/15/23, asking for assistance. Another email was sent 5/8/24 asking about the status of the agreement. Several phone calls were made with discussions regarding the status of the agreement. Another email was sent by the SVH Administrator on 6/24/24, 7/18/24, 8/27/24, 8/29/24, 9/17/24, 9/23/24 to ask about the status of the agreement. An email was sent 9/26/24 to ask for assistance with the agreement and getting it moving. Another email was sent 10/11/24, 10/24/24, 10/31/24 for a status update. An email was sent 11/5/24 asking for assistance. An email by the SVH Administrator was sent on 11/8/24, 11/19/24, 12/4/24 regarding the status of the sharing agreement. For residents #28, #29, #30, the selling/sharing agreement has been signed and initiated 12/11/2024.</p>	<p>Any resident that receives mental health at the VAMC has the potential to be affected.</p>	<p>The selling/sharing agreement has been completed and signed as of 12/11/2024.</p>	<p>The selling/sharing agreement has been signed as of 12/11/2024. The procurement officer/designee will monitor when renewal is due so the Administrator can contact the VA to discuss renewal. The current agreement is good until 2029.</p>	<p>4/1/2025</p>
--	--	---	--	--	-----------------

- 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.