

<p style="text-align: center;">Lancaster County Drug &amp; Alcohol Commission</p>	<p style="text-align: center;"><i>Universal #1</i></p> <p style="text-align: center;"><i>Policy: When a Corrective Action Plan (CAP) is warranted</i></p>
<p><i>Most Current Revision: 08122022</i> <i>Effective Date: 03112022</i></p>	<p style="text-align: right;"><i>Page: 1 of 2</i></p>

***I. Purpose***

To establish a protocol outlining when a Corrective Action Plan (CAP) is warranted

***II. Policy***

Areas of noncompliance are typically identified during annual monitoring visits. The purpose of LCDAC’s Monitoring Process is to assess the administrative, fiscal, and programmatic performance of the contracted service providers according to the DDAP Report Schedule, primarily using the tools and instructions issued by DDAP to identify contractual deficiencies. HOWEVER, provider noncompliance can also be identified following a complaint investigation and/or following a visit by LCDAC staff and/or when reviewing WITS data and/or during provider meetings. If/when contractual deficiencies are identified, LCDAC may require the contractor to submit a CAP.

The corrective action process links back to provider contracts and posted policies/procedures. As such, it is important that providers are utilizing the most current signed contract to fully execute the identified contractual requirements and expectations as well as the most current posted LCDAC policies/procedures, instructions, and forms. The corrective action process provides a clear mechanism to address areas of noncompliance. LCDAC will do its due diligence to communicate any issues of concern clearly and promptly. It is expected that the provider will submit the required CAP clearly and in the identified timeframe. Refer to *Universal 1a Instructions for Writing a CAP* and to the LCDAC CAP document titled *Universal 1b CAP Form*.

If the corrective action plan that is submitted does not effectively address the identified issue(s), then follow-up conversations may be needed with the provider to establish a better plan. Once the plan is approved, progress toward completion of action steps and success of the plan in addressing the issue(s) should be monitored by the provider. This could be done via written reports/updates or through meetings/phone calls. Establishing a process and/or specific dates to check-in throughout the course of the corrective action plan is important.

If action steps are not being completed or the steps in the corrective action plan do not resolve the issue, LCDAC will then consider the following:

- Meet with provider to discuss changes to corrective action plan that may better address the area of concern. Have provider submit a revised action plan based on this discussion.
- Meet with provider to determine barriers to completing action steps outlined and ways to overcome those barriers. Review potential sanctions for failure to implement corrective action plan and address area of noncompliance.
- Implement sanctions outlined below:

