

# Office of Provider Management

## Progressive Discipline Policy

The following protocol outlined will be implemented to address any policy violation infractions that may result due to the non-compliance or non-adherence to the RBWO Minimum Standards, the Division's Child Welfare policies and other contractual obligations. The Progressive Discipline Policy process comprises of two phases.

**Disclaimer: The Office of Provider Management maintains the exclusive right to move through or bypass various components of Phase One, Phase Two or any other components of the Progressive Discipline process as needed dependent on the severity of the non-compliance issue or concern at hand.**

### **Phase One:**

Phase one of the progressive discipline process is to provide our RBWO providers with the support and resources needed to identify and subsequently address any deficiencies or non-compliance issues that may arise while providing RBWO services to our children and youth in care.

**Technical Assistance** - When any deficiencies or policy violation infractions occur that indicate a need for intervention to circumvent further non-compliance with the RBWO Minimum Standards in any capacity, technical assistance will be provided:

- Technical assistance can include, but is not limited to, conducting a telephone conference to address any underlying issues and provide assistance in the form of resources, teaching, technical support, etc. in the area of concern to ensure the provider's progress and improvement in the identified area of need. Technical assistance may also include the completion of a site visit to provide hands on technical assistance with staff as needed to ensure a greater understanding and awareness of methods of decreasing the likeliness of further identified non-compliance concerns or issues.
- Technical assistance can be completed by any member or section of the Office of Provider Management team including the Monitoring, Risk Management, Resource Development or Training teams. Once a recurring non-compliance issue is identified and technical assistance has been provided, the type of technical assistance and what RBWO Minimum Standard violation issue that was addressed will be documented accordingly into GA+SCORE. This step will initiate Phase One of the Progressive Discipline process and will become a part of the RBWO provider's internal OPM History file.

**Quality Improvement Plan (QIP)** - A Quality Improvement Plan is a detailed work plan intended to enhance an organization's quality in a specific area. It includes essential information about how your organization will design, implement, and manage and assess quality. This plan should be developed by the utilization of S.M.A.R.T. goals and should result in the reduction of occurrence of further non-compliance in the specified area of concern.

- Once technical assistance pertaining to any identified deficiency, policy violation infraction or non-compliance issue is completed and documented in the provider's OPM History file, if the documented non-compliance issue arises again, a Quality Improvement Plan (QIP) will be requested for completion by the provider via GA+SCORE. The must be submitted via GA+SCORE.
- A QIP can only be requested when technical assistance has already been completed and documented in the provider's OPM History file for a given RBWO Minimum Standards non-compliance issue. Any occurrence of a newly identified compliance issue that does not pertain to the previous compliance issue will result in technical assistance being provided. A separate QIP will be requested for the newly identified compliance issue.
- If there is a re-occurrence and/or continuance of the identified RBWO non-compliance issue in which a Quality Improvement Plan has previously been completed and documented, the provider will enter Phase Two of the Progressive Discipline process to address the ongoing concern.
- The completion of all tasks outlined in the QIP will be monitored and tracked for progress by the Office of Provider Management every 30 days until the final completion of the QIP.

## **Phase Two:**

Phase Two of the Progressive Discipline process is to assist providers with ensuring compliance with the Minimum Standards, the Division's Child Welfare policies and contractual obligations through the utilization of corrective measures. This phase of the Progressive Discipline process serves as a means of decreasing the likelihood and re-occurrence of previously identified Minimum Standard non-compliance deficiencies while partnering to provide the necessary support in ensuring the understanding and comprehension of the Office of Provider Management expectations and requirements.

**Telephone Conference** - The purpose of the telephone conference is to provide collaboration with the Office of Provider Management and the provider in providing the opportunity to collectively discuss the identified deficiencies and concerns, mitigate and discuss areas of improvement, and for the provider to provide suggestions and feedback on how they plan to address the identified concerns to prevent further re-occurrence.

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- Depending on the severity of the identified non-compliance issue or concern, a telephone conference may be conducted following a repeat occurrence of an identified non-compliance issue which has already been addressed through the utilization of a Quality Improvement Plan.
- If a telephone conference is deemed to be warranted in lieu of an office conference, the telephone conference will be documented in the GA+SCORE database and incorporated into the provider's internal OPM History file.

**Office Conference** - The purpose of the office conference is to provide collaboration with the Office of Provider Management and the provider in providing the opportunity to collectively discuss the identified deficiencies and concerns, mitigate and discuss areas of improvement, and for the provider to provide suggestions and feedback on how they plan to address the identified concerns to prevent further re-occurrence.

- If the severity of the RBWO non-compliance issue arises immediate concerns regarding the safety, well-being and/or permanency of the services being rendered to care for our children and youth, an office conference will be scheduled in lieu of a telephone conference to further discuss the identified concerns.
- The office conference will be documented and become a part of the provider's internal OPM History file. A Letter of Concern will be issued and a Corrective Action Plan (CAP) will be requested for completion.
- Depending on the nature of the concerns identified and discussed during the office conference, OPM reserves the exclusive right to request changes to the provider's contract to remedy or address the identified non-compliance concerns including, but not limited to: a decrease in the provider's capacity, changes to the provider's program designation approvals, recommended trainings to be completed by the provider's staff as needed, an admission suspension or any other measures as deemed warranted to reduce the likelihood of further non-compliance to the Minimum Standards, the Division's Child Welfare policy and contractual obligations.

**Letter of Concern** - The Letter of Concern (LOC) comprises of a summarization of the various events that occurred leading up to the office conference. The Letter of Concern will also include a summary of the deficiencies found and a formalized request for the completion of a Corrective Action Plan (CAP) to address the identified non-compliance issues and concerns in a means of reducing and minimizing issues pertaining to the safety, well-being and permanency of our children and youth in care.

- The Letter of Concern will be submitted to the provider by the provider's corresponding Monitoring Manager or Provider Relations Manager via email on certified letterhead.
- The Letter of Concern will also be documented and uploaded into the GA+SCORE database and will be incorporated into the provider's internal OPM History file.

**Corrective Action Plan**- The Corrective Action Plan (CAP) serves as a means for the provider to develop a highly detailed and thorough plan regarding their strategy to address and minimize the occurrence of the identified concern or non-compliance issue found. This plan should be developed by the utilization of S.M.A.R.T. goals and should result in the reduction of occurrence of further non-compliance in the specified area of concern.

- The Corrective Action Plan must be submitted by the provider by the requested deadline via GA+SCORE. Once approved, the Corrective Action Plan will be uploaded into the GA+SCORE database and will become a part of the RBWO provider's internal OPM History file.
- The duration of a CAP that is implemented due to ongoing non-compliance to the Minimum Standards and/or contractual obligations as a part of the Progressive Discipline process is up to a duration of six months.
- During the time period in which the provider is under the CAP, the monitoring and supervision of the provider will be increased to ensure the ongoing progress of resolving of the identified non-compliance deficiencies in order to reduce the likelihood of further re-occurrence. The completion of all tasks outlined in the CAP will be monitored and tracked for progress by OPM every 30 days until the final completion of the CAP.
- Dependent upon the nature and severity of the identified concerns, the provider may be placed on an admission suspension (the inability to accept any new placements) in addition to CAP completion.

**Involuntary Admission Suspension** – An admission suspension consists of the inability of the provider of accepting any new additional placements. An admission suspension may or may not include a request to remove all placements at the time of request dependent on the severity.

- During a provider admission suspension, no new child or youth admissions can be made with the provider until the suspension is authorized for release. If it is found that further placements or admissions of children and youth into a provider program has been made at any time throughout the implemented admissions suspension period, further corrective measures may be taken by OPM including or up to the removal of placements.
- Any suspension on the admission of children and youth into a provider program will be documented in the GA+SCORE database and will be incorporated into the provider's internal OPM History file.

**Disclaimer:** **The Office of Provider Management maintains the exclusive right to recommend the immediate removal of any children or youth placed at a given RBWO provider program as a part of the suspension request if deemed warranted due to the severity or nature of a RBWO noncompliance issue or concern at hand.**

**Contract Termination:**

- At any point, the Office of Provider Management maintains the exclusive right to recommend and proceed with contract termination dependent upon the severity and/or nature of any given violation of the Minimum Standards, the Division's Child Welfare policy, contractual obligations or other non-compliance issue or concern.
- Once a provider has been placed on an involuntary admissions suspension due to an identified non-compliance concern and have been placed on an admissions suspension for six months or more, OPM will consider contract termination with the provider if the ongoing suspension is due to continued failure to resolve or address identified non-compliance issues or failure to comply or adhere to the provider's proposed Corrective Action Plan.

**Phase Three:**

- A S.B.A.R. (Situation, Background, Assessment, Recommendation) will be completed once OPM determines that a provider's contract will be terminated.
- The SBAR will consist of a summarization of the history of the provider's deficiency issues including, but not limited to, a history of all technical assistance provided, letter of concerns, summary of policy violations, PBP scores, staffing concerns, physical plant concerns, and any past involuntary admission suspensions.
- The SBAR will be staffed with the Permanency and Placement Director and attorney prior to contract termination finalization.