CORRECTIVE ACTION PLAN (CAP)

Michigan Department of Health and Human Services Division of Child Welfare Licensing

| Facility Name | License # | Date | | | | | |
|--|---------------------------------------|-----------|--|--|--|--|--|
| West Michigan Partnership for Children | CB410381414 | 8/12/2021 | | | | | |
| Type of Inspection | | | | | | | |
| | enewal/Interim Special Investigation# | | | | | | |
| | | | | | | | |
| Inspecting/Investigating consultant name | | | | | | | |
| Kari Muntean | | | | | | | |
| Michigan Department of Health and Human Services – Division of Child Welfare Licensing | | | | | | | |
| Address | | | | | | | |
| 213 Sheldon Ae SE | | | | | | | |
| City | State | Zip Code | | | | | |
| Grand Rapids | MI | 49503 | | | | | |
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| | | | | | | | |
| Description of CAP (Optional) | | | | | | | |
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In response to the above noted licensing inspection/investigation, please accept the following corrective action plan to bring the facility into compliance with licensing rules.

| Licensing Rule Violation | Is this a subsequent violation for the same rule within 2 years? Yes No | Plan for compliance achievement. If this is a subsequent violation for the same rule, explain why the previous CAP was unsuccessful. | Individual responsible for CAP implementation | Time frame for implementation | Plan for ongoing maintenance, including time frame | Date implemented or completed on |
|-----------------------------|---|--|--|-------------------------------|--|----------------------------------|
| R40012212 Personnel | No | Implement | Director of PQI | August 1, 2021 | Quarterly review by | August 1, 2021 |
| records. | | electronic payroll | | , , , | finance team. | , , |
| | | and HR system | | | | |
| | | (Workforce Go) | | | | |
| | | that includes | | | | |
| | | mandatory | | | | |
| | | checklists for all | | | | |
| | | required documents | | | | |
| | | related to new | | | | |
| | | staff. | | | | |
| Medical - Initial | Yes | The COVID-19 | PQI Manager | August 18, | Formal performance | |
| | | pandemic has | | 2021 and on- | review quarterly | |
| | | continued to | | going | through contract | |
| | | <pre>impact performance throughout the</pre> | | | management meetings. Monthly monitoring | |
| | | year. | | | through WMPC | |
| | | year: | | | coordinators. | |
| | | Performance will | | September 30, | coordinators: | |
| | | be monitored | | 2021 | | |
| | | monthly and | | | | |
| | | formally reviewed | | | | |
| | | with each PAFC | | | | |
| | | quarterly. As part | | | | |
| | | of the review | | | | |
| | | process, WMPC will | | | | |
| | | develop individual | | | | |
| | | performance | | | | |
| | | improvement plans | | | | |
| | | with each agency. | | | | |
| | | These plans will outline | | | | |
| | | improvement | | | | |
| | | activities each | | | | |
| | | agency will | | | | |
| | | undertake in order | | | | |

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| | to achieve | | | |
| | compliance. These | | | |
| | plans will be | | | |
| | reviewed and | | | |
| | updated quarterly. | | | |
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| | framework for | | | |
| | notifying workers | | | |
| | of upcoming | | | |
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| | were missed or not | | | |
| | | | | |
| | completed timely. | | | |
| | WMPC will also | | | |
| | monitor upcoming | | | |
| | appointments | | | |
| | through the book | | | |
| | of business on a | | | |
| | monthly frequency | | | |
| | to support the | | | |
| | agency in | | | |
| | preventing | | | |
| | untimely visits. | | | |
| | Examples of other | | | |
| | | | | |
| | forward looking | | | |
| | performance | | | |
| | improvement and corrective action | | | |
| | | | | |
| | activities that | | | |
| | WMPC will monitor | | | |
| | are: | | | |
| | • Calendaring | | | |
| | upcoming | | | |
| | appointments | | | |
| | for case | | | |
| | managers. | | | |
| | • Sending | | | |
| | letters of | | | |
| | appointments | | | |
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| | | The performance | | | | |
| | | dashboards that | | | | |
| | | were developed | | | | |
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| | | into the reviews | | | | |
| | | and performance | | | | |
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| | | improvement plans. | | | | |
| | | TIMES 11 | | | | |
| | | WMPC will | | | | |
| | | facilitate a | | | | |
| | | monthly meeting | | | | |
| | | with the PQI leads | | | | |
| | | at each agency to | | | | |
| | | share and | | | | |
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| | | practices related | | | | |
| | | to preventing and | | | | |
| | | learning from | | | | |
| | | untimely visits. | | | | |
| Medical - Periodic | Yes | The COVID-19 | Director of | August 18, | Formal performance | |
| Hedical - Fellodic | 169 | pandemic has | | 2021 and on- | | |
| | | - | PQI, PQI | | review quarterly | |
| | | continued to | Manager, and | going | through contract | |
| | | impact performance | coordinators | | management meetings. | |
| | | throughout the | | | Monthly monitoring | |
| | | year. | | | through WMPC | |
| | | | | | coordinators. | |
| | | Performance will | | September 30, | | |
| | | be monitored | | 2021 | | |
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| | | to preventing and | | | | |
| | | learning from | | | | |
| | | untimely visits. | | | | |
| Dental - Initial | Yes | The COVID-19 | Director of | August 18, | Formal performance | |
| | | pandemic has | PQI, PQI | 2021 and on- | review quarterly | |
| | | continued to | Manager, and | going | through contract | |
| | | impact performance | | ر ر | management meetings. | |
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| process, WMPC will develop individual performance improvement plans with each agency. These plans will outline improvement activities each agency will undertake in order to achieve compliance. These plans will be reviewed and updated quarterly. |
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| | | practices related | | | | |
| | | to preventing and | | | | |
| | | learning from | | | | |
| | | untimely visits. | | | | |
| Children's Foster | Yes | Performance will | Director of | August 18, | | |
| | 169 | | | | | |
| Care Timely Case | | be monitored | PQI, PQI | 2021 and on- | | |
| Service Plan | | monthly and | Manager, and | going | | |
| Approvals | | formally reviewed | coordinators | | | |
| | | with each PAFC | | | | |
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| quarterly. As part | | |
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| of the review | | |
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| the book of | | |
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| agency in | | |
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| untimely | | |
| approvals. WMPC | | |
| will work with | | |
| agencies to send | | |
| | | |
| notification of | | |
| approval due dates | | |

| | a week in advance | | | |
|----------|-------------------|--|---|--|
| | to ensure enough | | | |
| | time for comments | | | |
| | and amendments | | | |
| | before approval. | | | |
| | Defote approvar. | | | |
| | WMPC will work | | | |
| | | | | |
| | with agencies to | | | |
| | provide protected | | | |
| | time for | | | |
| | supervisors to | | | |
| | complete | | | |
| | administrative | | | |
| | tasks associated | | | |
| | with plan | | | |
| | approvals. | | | |
| | | | | |
| | The performance | | | |
| | dashboards that | | | |
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| | learning from | | | |
| | untimely | | | |
| | approvals. | | | |
| <u> </u> | · | | 1 | |

| Supervisor | No | Supervisor | Director of | August 18, | Formal performance | |
|------------|-----|--------------------|---------------|---------------|----------------------|--|
| Oversight | 1.0 | Oversight reports | PQI, PQI | 2021 and on- | review quarterly | |
| | | in Infoview do | Manager, and | going | through contract | |
| | | not currently | coordinators | 902119 | management meetings. | |
| | | capture meetings | 0001411140010 | | Monthly monitoring | |
| | | occurring through | | | through WMPC | |
| | | alternative means | | | coordinators. | |
| | | (video). True | | | coordinators. | |
| | | performance is | | | | |
| | | unknown, but | | | | |
| | | historically | | | | |
| | | performance in | | | | |
| | | this area has | | | | |
| | | remained | | | | |
| | | consistent and | | | | |
| | | above the target. | | | | |
| | | WMPC will | | | | |
| | | continue to | | | | |
| | | monitor | | | | |
| | | frequently. | | | | |
| | | rrequencry: | | | | |
| | | Performance will | | September 30, | | |
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| | | and performance | | | | |
| | | improvement plans. | | | | |
| Adoption | Yes | Performance will | Director of | August 18, | Formal performance | |
| Finalizations | | be monitored | PQI, PQI | 2021 and on- | review quarterly | |
| | | monthly and | Manager, and | going | through contract | |
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| | | | | | | |
| | | The performance | | | | |
| | | dashboard | | | | |
| | | developed for | | | | |
| | | adoption | | | | |
| | | finalization | | | | |
| | | enables managers | | | | |
| | | to see their | | | | |
| | | progress against | | | | |
| | | individual agency | | | | |
| | | targets. WMPC will | | | | |
| | | use this dashboard | | | | |
| | | with the agencies | | | | |
| | | monthly to | | | | |
| | | WOHEHT A CO | | | | |

| identify the |
|--------------------|
| number of children |
| that need to have |
| adoption |
| finalizations to |
| meet the |
| performance |
| target. |
| |
| WMPC will also |
| monitor and report |
| on average time to |
| adoption for each |
| agency and work |
| with agencies to |
| improve timely |
| documentation. |
| |
| WMPC will |
| facilitate a |
| monthly meeting |
| with the PQI and |
| adoption leads at |
| each agency to |
| share and |
| standardize best |
| practices related |
| to preventing and |
| learning from |
| delays from |
| adoption |
| finalizations. |

Corrective Action Plans must be signed by the Chief Administrator.

The Chief Administrator must sign the initial corrective action plan (required).

| 9/10/2021 |
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| Date |
| 9/10/2021 |
| |
| Date |
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| Signature | Title | Date | | | | |
|--|-------------------------|-----------|--|--|--|--|
| | | | | | | |
| Please accept my signature as confirmation this corrective action plan has been fully implemented. (Must be signed by the Chief Administrator). | | | | | | |
| Signature | Title | Date | | | | |
| Sonia Noorman | Chief Executive Officer | 9/10/2021 | | | | |