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DQA Memo 13-002

**To:** [Adult Day Care](#)  
[Adult Family Homes](#)  
[Community-based Residential Facilities](#)  
[Residential Care Apartment Complexes](#)

ADC 02  
AFH 02  
CBRF 02  
RCAC 02

**From:** Alfred C. Johnson, Director  
Bureau of Assisted Living

**Via:** Otis Woods, Administrator  
Division of Quality Assurance

**E-SOD/E-POC Initiative**

Starting January 2013, the Division of Quality Assurance, Bureau of Assisted Living will issue Statements of Deficiencies (SOD) electronically using email addresses provided by assisted living providers. The provider is able to use a Plan of Correction (POC) form to electronically submit this information to DQA.

**E-SOD/E-POC Initiative**

Since 2007, the Division of Quality Assurance (DQA) has been piloting electronic delivery of Statements of Deficiencies (SODs) and receipt of Plans of Correction (POCs) for other types of providers, such as nursing homes. Refer to DQA Memo 12-011 for more information.

This process involves e-mail delivery of an electronic copy of the SOD and allows the provider to complete the required plan of correction electronically and submit it to DQA by replying to the original e-mail. Providers participating in the pilot project have indicated their acceptance of this format and encouraged the extension of this process to all DQA-regulated providers.

A Provider Agreement form is used to obtain authorization from the licensee to receive SODs electronically using an e-mail address they specify. The effective date of service for SODs is the date the transmitting e-mail message is sent from DQA to the provider's authorized representative. Providers not electing to use the e-SOD/e-POC process will continue to have SODs served by mail and will be required to complete the POC on paper and return it to DQA by mail. Information about the e-SOD/e-POC process is available on the following DQA web page: [http://www.dhs.wisconsin.gov/rl\\_dsl/Providers/e-sod.htm](http://www.dhs.wisconsin.gov/rl_dsl/Providers/e-sod.htm)

## **Provider Agreement**

The Provider Agreement form will be completed by the licensee or authorized representative and returned to the appropriate regional office. The licensee or authorized representative signs and dates the Provider Agreement form and agrees to accept the survey documents, including Statements of Deficiency (SODs) via e-mail at the e-mail address provided on the Provider Agreement form.

If the licensee's or authorized representative's email address changes, the licensee or authorized representative will submit a new Provider Agreement form to the appropriate regional office.

The licensee or authorized representative agrees to submit the Plan(s) of Correction (POCs) using the supplied Department form, via e-mail to the appropriate regional office.

During the entrance conference, the surveyor will confirm with the licensee or authorized representative that the Provider Agreement form contains up to date information.

## **Encryption**

The e-mail sent from DQA containing the e-SOD and attachments will be emailed encrypted to the provider.

[DQA Memo 10-031](#) provides information for how to view an encrypted e-mail by either creating an account with the CISCO Registered Envelope Service (CRES) or establishing a Transport Layer Security (TLS) connection.

Also available is [online e-mail encryption training for partners, providers and constituents](#).

## **E-Mail and Attachments**

The e-mail sent by DQA will identify documents that are attached and will include basic instructions for saving these files and for returning required documents.

It is important for the provider to confirm receipt of the e-mail and attachments by opening this e-mail and emailing a reply to the DQA sender of the e-mail.

Listed below are files that may be attached to an e-mail to a provider following a survey.

- **Statement of Deficiency Cover Letter** - A letter from DQA providing information about a recent survey.
- **A Statement of Deficiency (SODs) - Form CMS-2567** identifies each citation being issued.
- **Plan of Correction (POC) Form (F-00344)** - The provider uses this form to document their plan of correction for each citation listed on the SOD.
- **Identifier Key (F-62552)** - Confidential Information. Lists names of residents, patients, clients, staff, complainants, family members. **Do not** e-mail this document back to DQA.

To save e-mail attachments:

1. Right click on an attachment in the e-mail and then select “Save As”... on the pop-up menu.
2. To the right of the “Save In:” dialog box, identify a drive and folder on your computer to save the file to.
3. Then click on “Save.”
4. Repeat these steps for each attachment.

### **Completing the Electronic Plan of Correction**

1. Open the saved Plan of Correction Form (F-00344) in Word. Do not alter the format of this form.
2. Enter the respective tag number(s) as listed in the first column (x4) of the SOD in the first column (x4) of the E-POC form.
3. In the second column, Provider's Plan of Correction, describe the corrective action(s) that have or will be taken to address this deficient practice referenced by this tag number. The cells in the Word form are formatted to expand as necessary to allow entry of multiple lines of text.
4. Enter the completion date for that corrective action in the third column (x5).
5. Complete this process for all tags issued entering them in the same order as they are listed on the SOD.
6. Save and close the document.

Save regularly throughout entry of the POC to avoid loss of information.

### **E-Mailing the Plan of Correction**

1. Open the e-mail sent by DQA containing the E-SOD and Reply to this email.
2. Attach the completed E-POC form.
3. Send the e-mail.

### **Survey Process - Acceptable Plan of Correction**

Refer to the Statement of Deficiency letter for required elements in your plan of correction.

Listed below is a link to the Assisted Living Survey Guide. This guide provides information about the survey process including the contents for an acceptable Plan of Correction.

[Assisted Living Facility Survey Guide](#) (PDF, 118 KB)

The plan of correction must describe the corrective action the provider will take to address the cited violation or deficiency. Although a provider may include in its plan of correction a statement that it disagrees with the survey findings, a provider may not use the plan of correction to malign surveyor.

If you would like to participate in this initiative you may contact the Assisted Living Regional Director for the county in which your facility is located (see the following link).

[http://www.dhs.wisconsin.gov/rl\\_DSL/Contacts/alsreglmap.htm](http://www.dhs.wisconsin.gov/rl_DSL/Contacts/alsreglmap.htm)