



CONNECT Provider Portal - How Do I Job Aid

How Do I Submit a Corrective Action Plan (CAP) in CONNECT?

When a licensing report is issued by the Office of Licensing following an inspection or an investigation, the provider's Main Authorized Contact (MAC) will receive an email notification. This email will include an attached letter that contains important information for how to complete the Corrective Action Plan (CAP). To respond to a licensing report, the provider will need to log into the provider portal and choose the Corrective Action Plans options from the Menu. All inspections and investigations completed for an organization will display one of the following statuses:

Status	Explanation
Complete-No Violations	An inspection or investigation that did not result in citations will display a "No Violation" CAP and the provider does not need to provide a response. Providers with this status will have a link to view the CAP.
Pending	The inspection or investigation is in progress.
Issued	An inspection or investigation has resulted in citations requiring a Corrective Action Plan and the provider is required to submit a response for each regulatory violation. A CAP will be in this status if it is reissued to a provider due to being partially accepted or not accepted.
Returned	A provider's Corrective Action Plan has been submitted to the department and responses will be reviewed by the licensing specialist to determine if the CAP is approved or not approved. When in this status, it can no longer be viewed by the provider.
Approved	Inspections or investigations that resulted in citations and have approved corrective action plans. Providers with this status will have a link to view the CAP.

Note: A CAP may be partially accepted or not accepted, which will require an additional response from the provider. A provider will be notified if revised corrective actions are necessary.

The following Job Aid provides step-by-step instructions on how to successfully submit a Corrective Action Plan to the Office of Licensing.

Section 1: [View the CAP Correspondence Letter](#)

Section 2: [Request an Extension](#)

Section 3: [Respond to the CAP](#)

Section 4: [Respond to a Re-Issued CAP that was Partially Accepted or Not Accepted](#)

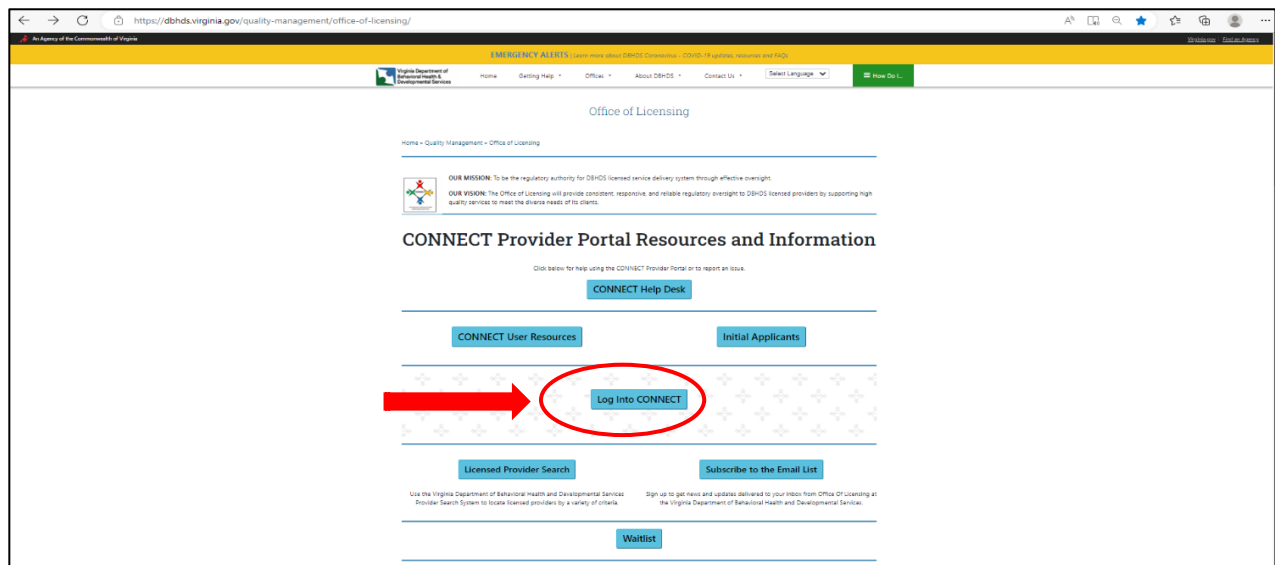
Section 5: [View an approved CAP](#)

Section 1: How Do I view the CAP Correspondence Letter in CONNECT?

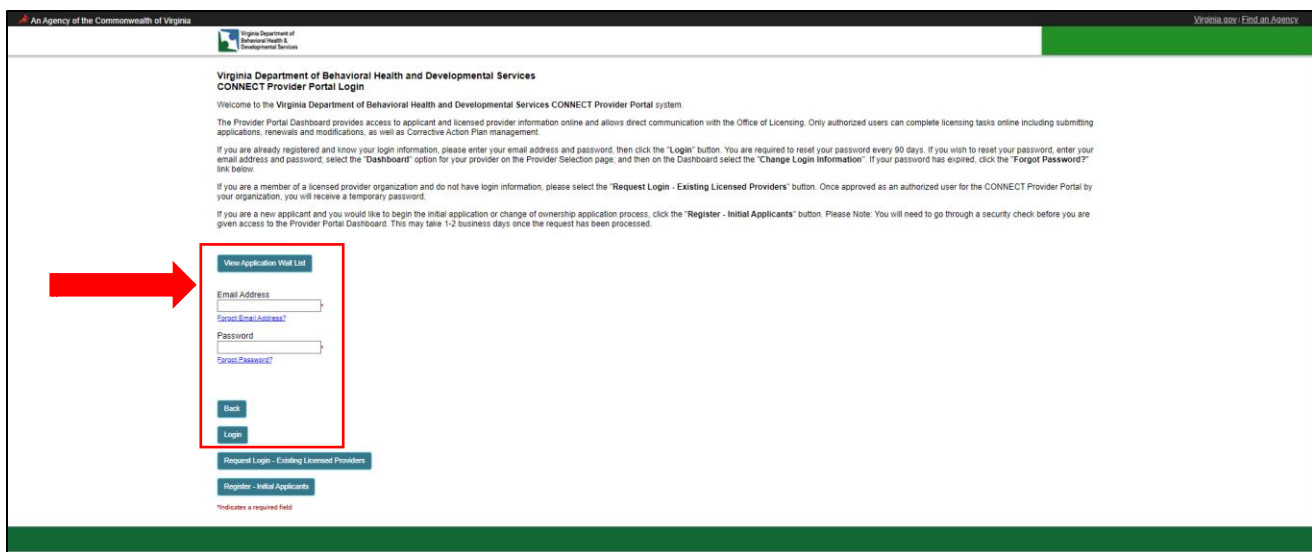
Step 1: The provider's MAC will receive an email notification when a Licensing Report has been issued. This email will include an attached letter that contains important information for how to complete a Corrective Action Plan, including the Due Date. The provider will also receive a correspondence through the CONNECT Provider Portal.

Note: The Provider will receive a Response Deadline Email three business days prior to the CAP's Due Date if the Provider has not submitted their CAP.

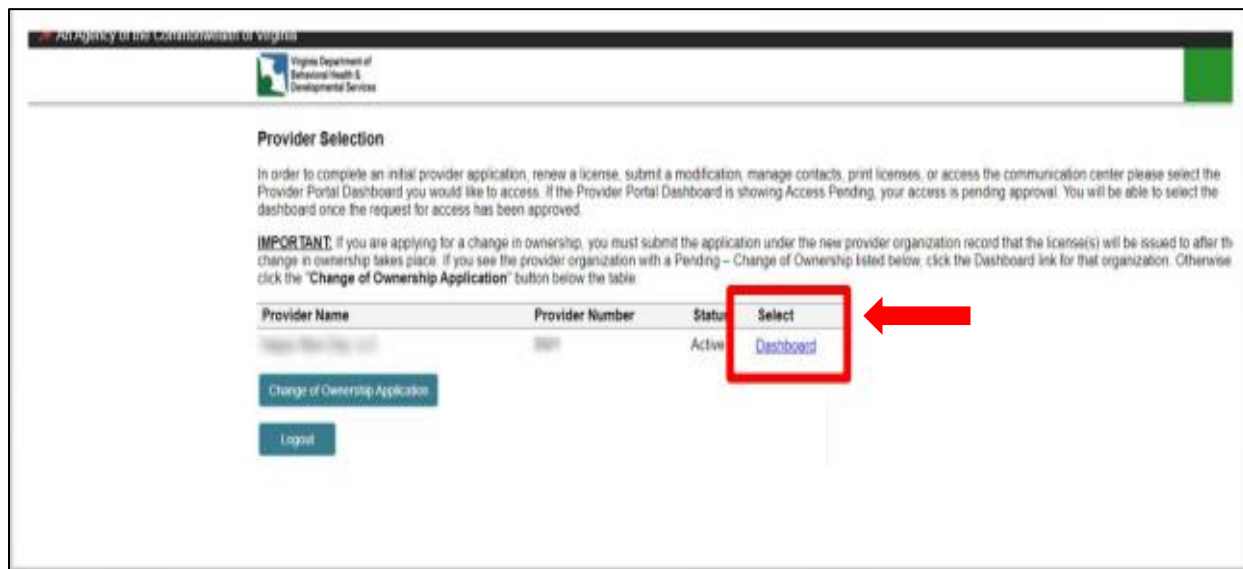
Step 2: From the DBHDS Office of Licensing website, click the **Log into CONNECT** button.



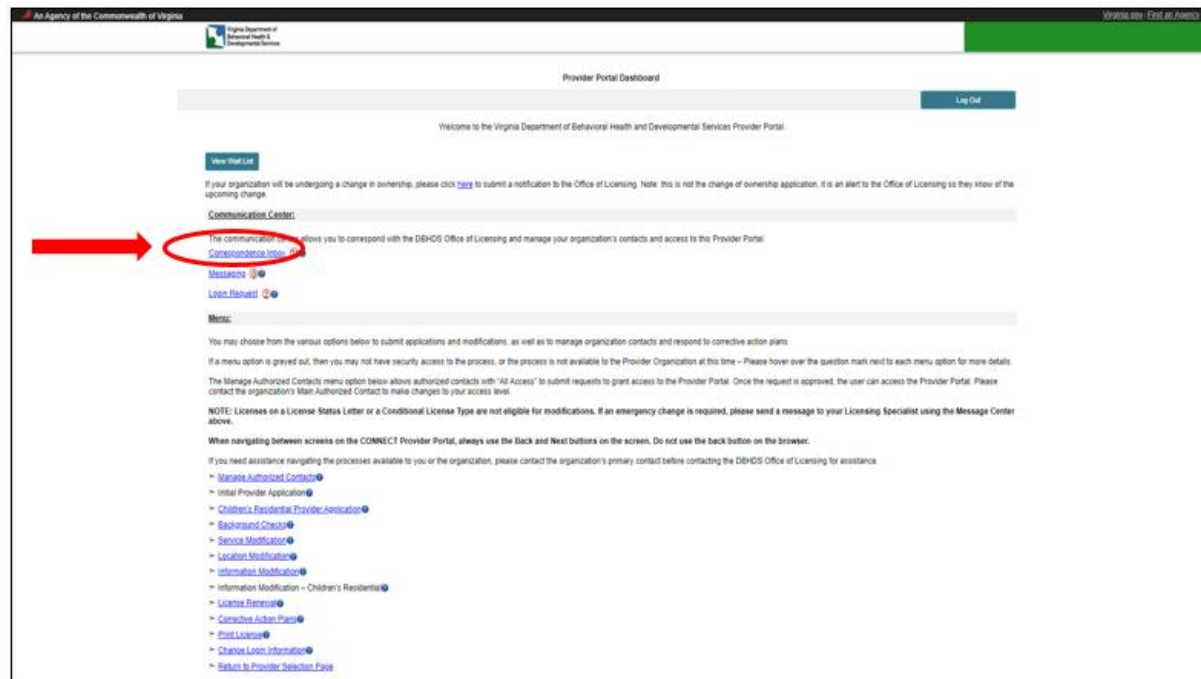
Step 3: From the CONNECT Provider Portal Login page, enter the User Account **Email Address** and **Password**. Click the **Login** button.



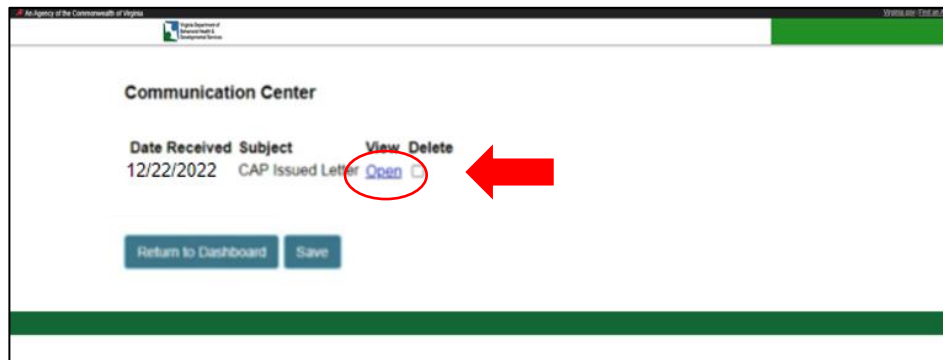
Step 4: From the provider landing page, click the **Dashboard** button to open the Provider Dashboard.



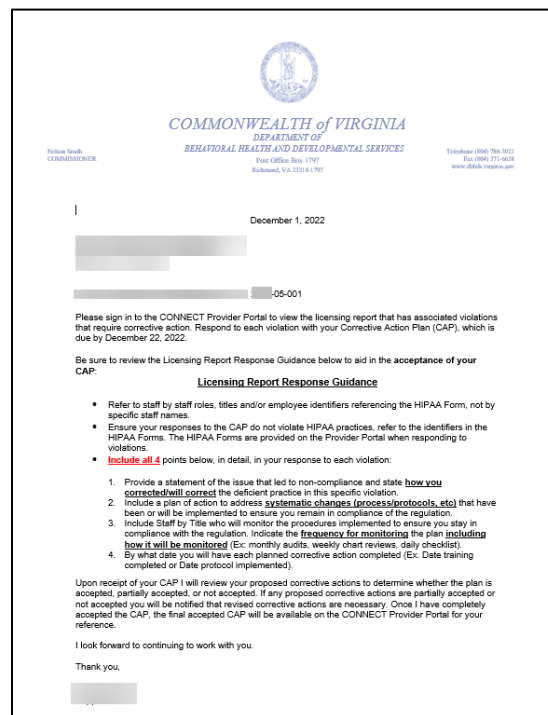
Step 5: Click the **Correspondence Inbox** link to view letters received from the Office of Licensing.



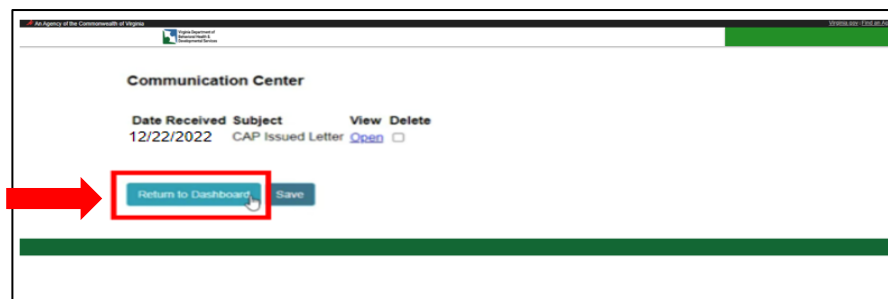
Step 6: Click the **Open** link to view the CAP issued letter.



CAP Correspondence Example

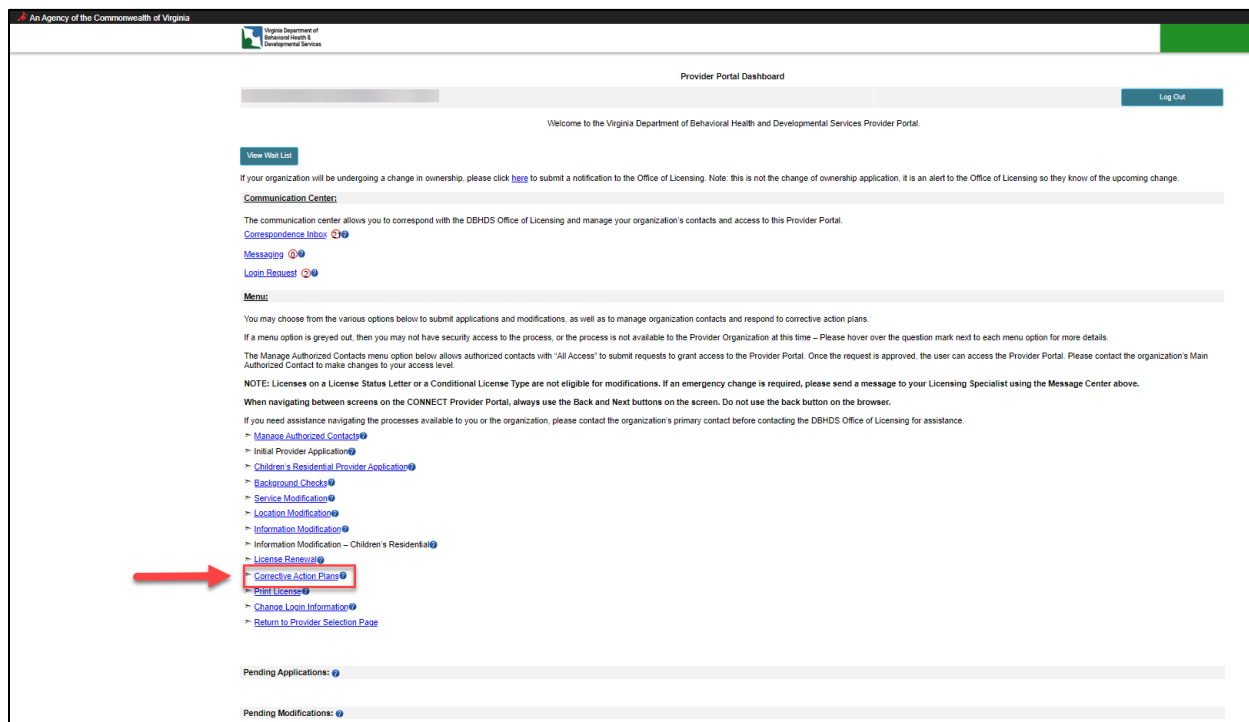


Step 7: When finished click **Return to Dashboard**.



Section 2: How Do I Request a CAP Extension?

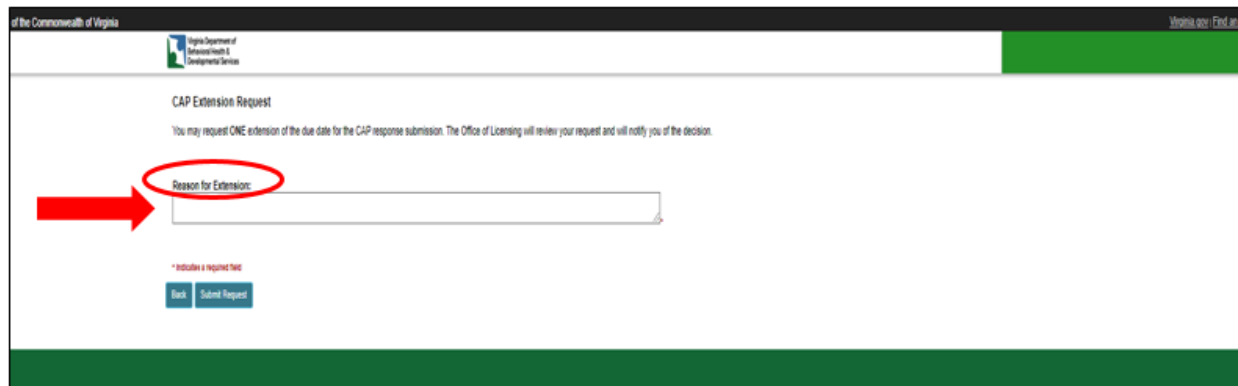
Step 1: From the Provider Portal Dashboard Menu, click the **Corrective Action Plans** link.



Step 2: From the Inspections History landing page, you will be able to see completed and pending inspections. To request an extension, the CAP must have a status of **Issued**. Click the **View CAP** link.

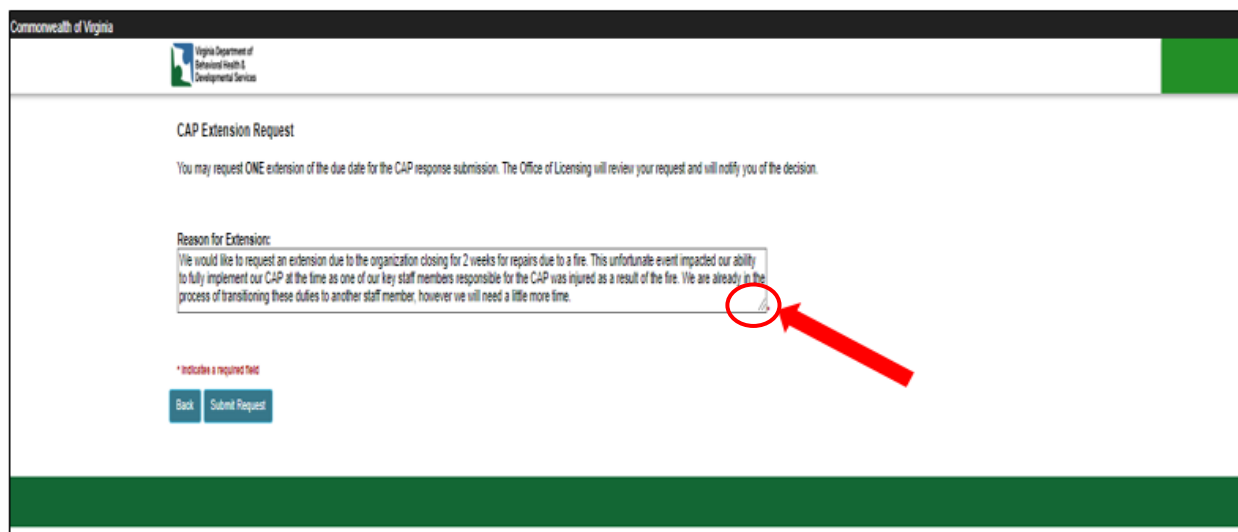
Note: You may request only **one** extension for the issued CAP. The Office of Licensing will review your request. If your request for extension is approved, a new CAP due date will be updated. Extensions to the 15 business day timeline for submitting a CAP may be granted to a provider only if requested by the provider **PRIOR** to the due date, and only for one additional period of up to 10 business days. The new due date for the CAP will be up to 10 business days from the date the CAP was due, and not up to 10 business days from the date the extension was requested.

Step 4: Complete the **Reason for Extension** response field.



The screenshot shows the 'CAP Extension Request' form. At the top, it says 'Commonwealth of Virginia' and 'Virginia Department of Behavioral Health & Developmental Services'. Below this, the title 'CAP Extension Request' is followed by a sub-header: 'You may request ONE extension of the due date for the CAP response submission. The Office of Licensing will review your request and will notify you of the decision.' The 'Reason for Extension:' label is circled in red, and a red arrow points to the text input field below it. Below the input field, there is a red asterisk with the text '* indicates a required field' and two buttons: 'Back' and 'Submit Request'.

Note: The provider has the ability to expand the **Reason for Extension** field to display the contents in the field by clicking and dragging the lower right corner.



This screenshot shows the same 'CAP Extension Request' form, but the 'Reason for Extension' field is now expanded to show a text area. The text inside the field reads: 'We would like to request an extension due to the organization closing for 2 weeks for repairs due to a fire. This unfortunate event impacted our ability to fully implement our CAP at the time as one of our key staff members responsible for the CAP was injured as a result of the fire. We are already in the process of transitioning these duties to another staff member, however we will need a little more time.' A red circle highlights the lower right corner of the text area, with a red arrow pointing to it, indicating where to click and drag to expand the field. Below the text area, the same red asterisk with the text '* indicates a required field' and the 'Back' and 'Submit Request' buttons are visible.

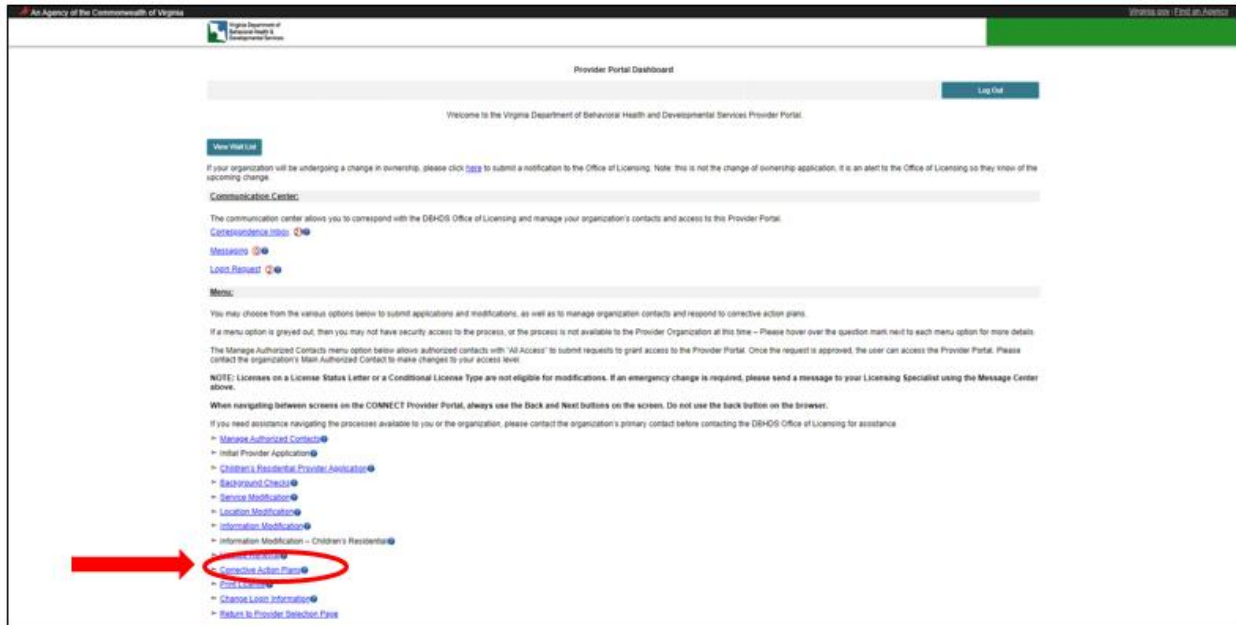
Step 5: Once complete, click the **Submit Request** button.

Step 6: Click the **Save and Close** button.

Standard/Cited	Comp	Description of Non-Compliance	Actions to be Taken	Planned Completion Date	Status
12VAC35-195-178 G	Non-Compliant	This regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/2022 related to Regulations 195.5 and 688. Based on the 12/16/2022 inspection, the provider failed to implement their approved CAP from the previous unannounced inspection dated 6/1/2022.	PR: 12/02/2022 Provide Response to citation	12/22/2022	Pending Review
12VAC35-195-178 H (1)	Non-Compliant	This regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/22 related to Regulations 195.5 and 688. Based on a review of the provider's Quality Improvement Plan, the provider did not monitor implementation and effectiveness of the approved corrective actions from the 6/1/22 unannounced inspection as part of its quality improvement program required by 12VAC35-195-620.	PR: 12/02/2022 Provider Response to 2nd Citation	12/30/2022	Pending Review

Section 3: How Do I Respond to a Corrective Action Plan (CAP)?

Step 1: To view Corrective Action Plans (CAP) click the **Corrective Action Plans** link in the menu.



Step 2: All inspections completed for your organization will display on this screen with one of the following statuses:

Status	Explanation
Complete-No Violations	An inspection or investigation that did not result in citations will display a "No Violation" CAP and the provider does not need to provide a response. Providers with this status will have a link to view the CAP.
Pending	The inspection or investigation is in progress.
Issued	An inspection or investigation has resulted in citations requiring a Corrective Action Plan and the provider is required to submit a response for each regulatory violation. A CAP will be in this status if it is reissued to a provider due to being partially accepted or not accepted.
Returned	A provider's Corrective Action Plan has been submitted to the department and responses will be reviewed by the licensing specialist to determine if the CAP is approved or not approved. When in this status, it can no longer be viewed by the provider.

Approved	Inspections or investigations that resulted in citations and have approved corrective action plans. Providers with this status will have a link to view the CAP.
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Note: Only inspections that are in the status of “Issued” or those with a status of “Complete-No Violations” or “Approved” will have the link to **View CAP**.

Step 3: An inspection with an “Issued” status requires a response. Click the **View CAP** link to begin the response process.

Inspection Date	Service	Location	Due Date	Status
12/07/2022	07-006 - Outpatient Service /Crisis Stabilization		12/28/2022	Issued
	07-006 - Outpatient Service /Crisis Stabilization			Complete - No Violations

[View CAP](#)

[Return to Dashboard](#)

Step 4: The CAP page will open with key information about the CAP including the date of the inspection, standards cited with the description of non-compliance and the CAP due date. Click the **View ID HIPAA Form** and **View Medication HIPAA Form** links to obtain additional information related to the inspection.

[Print CAP](#)

[How to Respond to a CAP](#)

CAP Due Date: 11/29/2022 [View Due Date History](#)

License #: 05-001 Date of Inspection: 10/11/2022

Organization Name: Program Type/Facility Name: 05-001 -

[View ID HIPAA Form](#)

[View Medication HIPAA Form](#)

Instructions:

Review the Office of Licensing guidance to aide in the acceptance of your Corrective Action Plan (CAP). Select the Enter Response link to enter your CAP details.

- DO refer to staff by staff roles and/or employee identifiers referencing the HIPAA Form.
- DO ensure your responses to the CAP do not violate HIPAA practices, refer to the identifiers in the provided HIPAA Forms.
- DO enter any new information **after** you have edited the previously submitted one by clicking **Enter Response**.
- DO provide: a statement of the issue that led to non-compliance; a statement of how you corrected the issue; a plan of action to address systematic (process/protocols) that have been or will be implemented to ensure you remain in compliance of the regulation; and include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation, and indicate the frequency for monitoring the plan including how it will be monitored.
- If the **Edit Response** link displays, edit the previously submitted response as instructed by the Office of Licensing and ensure you enter a new response indicating you have made the edit.
- DO NOT change the original response beyond the specific item requested by the Office of Licensing.

Standard(s) Cited	Comp	Description of Non-Compliance	Actions to be Taken	Planned Completion Date	Status
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Note: The HIPAA forms are important to reference when reviewing the description of non-compliance and entering the actions to be taken. Please use the identifiers for staff, individuals, and medications from the HIPAA forms when responding to the citations. If any HIPAA information is included in any actions to be taken, the CAP will not be accepted, and you will be required to edit and remove the HIPAA data.

Step 5: Click the **Enter Response** link next to the citation.

Commonwealth of Virginia

Virginia Department of Behavioral Health & Developmental Services

[Print CAP](#)

[How to Respond to a CAP](#)

[Request Extension](#)

CAP Due Date: 12/22/2022 [View Due Date History](#)

License #: _____ Date of Inspection: 11/30/2022

Organization Name: _____ Program Type/Facility Name: 05-001

[View ID HIPAA Form](#)

[View Medication HIPAA Form](#)

Instructions:

Review the Office of Licensing guidance to aid in the acceptance of your Corrective Action Plan (CAP). Select the Enter Response link to enter your CAP details.

- DO enter to staff by staff roles and/or employee identifiers referencing the HIPAA Form.
- DO ensure your responses to the CAP do not violate HIPAA practices, refer to the identifiers in the provided HIPAA Forms.
- DO enter any new information **after** you have edited the previously submitted one by clicking **Enter Response**.
- DO provide a statement of the issue that led to non-compliance, a statement of how you corrected the issue, a plan of action to address systematic (process/practices) that have been or will be implemented to ensure you remain in compliance of the regulation, and include staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation, and indicate the frequency for monitoring the plan including how it will be monitored.
- IF the Enter Response link displays with the previously submitted response as instructed by the Office of Licensing and ensure you enter a new response indicating you have made the edit.
- DO NOT change the original response beyond the specific item requested by the Office of Licensing.

Standard(s) Cited	Comp	Description of Non-Compliance	Actions to be Taken	Planned Completion Date	Status
12VAC35-105-179 G	Non-Compliant	The regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/2022 related to Regulations 150.5 and 600. Based on the 12/16/2022 inspection, the provider failed to implement their approved CAP from the previous unannounced inspection dated 6/1/2022.	PR: 12/10/2022 Provide Response to citation	12/22/2022	Pending Review Enter Response
12VAC35-105-179 H (1)	Non-Compliant	The regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/22 related to Regulations 150.5 and 600. Based on a review of the provider's Quality Improvement Plan, the provider did not monitor implementation and effectiveness of the approved corrective actions from the 6/1/22 unannounced inspection as part of its quality improvement program required by 12VAC35-105-620.	PR: 12/10/2022 Provide Response to 2nd Citation	12/30/2022	Pending Review Enter Response

General Comments / Recommendations:

Please check that your responses are complete before submitting to the Office of Licensing. You may NOT make changes to your CAP Response once you click the "Submit CAP" button.

[Save and Close](#) [Submit CAP](#)

Step 6: On the response screen you must include the **Final Planned Completion Date** for your actions.

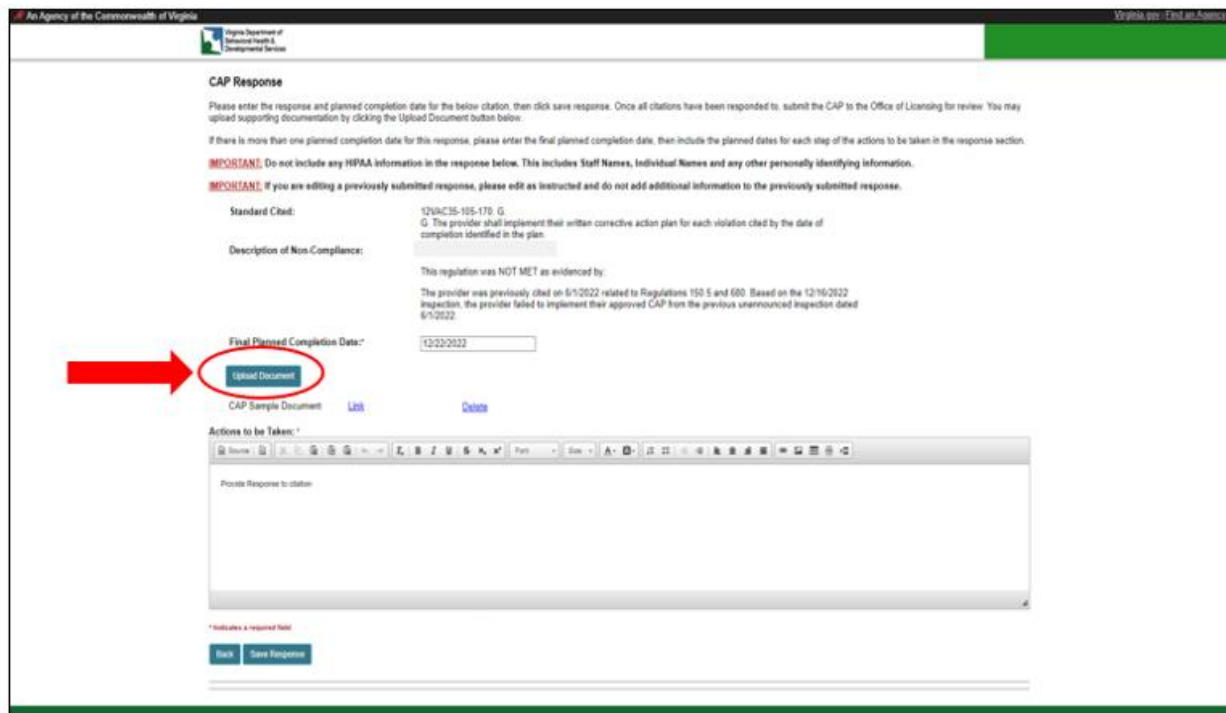
The screenshot shows the 'CAP Response' form in the Virginia Department of Behavioral Health & Developmental Services system. The form includes instructions, a 'Standard Cited' field with the citation '12VAC35-105-175 G', a 'Description of Non-Compliance' field with a detailed explanation, and a 'Final Planned Completion Date' field. A red rectangular box highlights the 'Final Planned Completion Date' field, which contains the date '12/22/2022'. A red arrow points from the right towards this field. Below the date field are buttons for 'Upload Document', 'CAP Sample Document', 'Link', and 'Delete'. At the bottom, there is a section for 'Actions to be Taken' with a text area for providing a response to the citation, and 'Back' and 'Save Response' buttons.

Note: If the actions include multiple completion dates, provide the completion date for each step within the **Actions to be Taken** response field for each standard cited. A final completion date for all actions relevant to the citation will need to be entered in the **Final Planned Completion Date** field.

Step 7: Enter the response in the **Actions to be Taken** field.

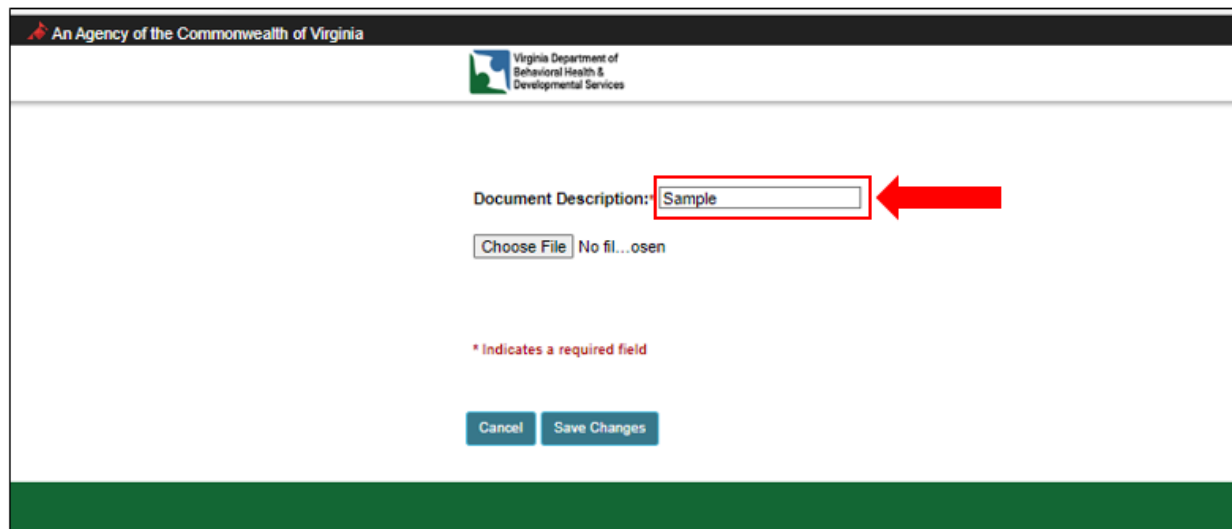
This screenshot shows the same 'CAP Response' form as the previous one, but with a different focus. A red rectangular box highlights the 'Actions to be Taken' section, which includes a text area for providing a response to the citation. A red arrow points from the left towards this section. The 'Final Planned Completion Date' field still shows '12/22/2022'. The 'Back' and 'Save Response' buttons are visible at the bottom.

Step 8: Click the **Upload Documents** button to upload any supporting documents with your response (if applicable).



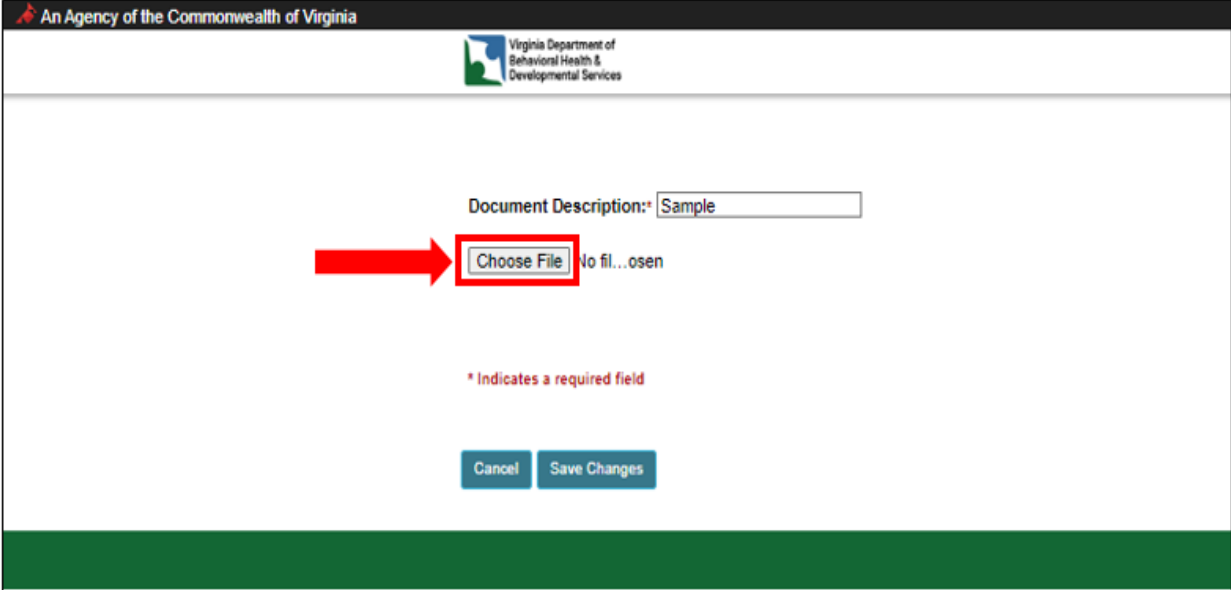
The screenshot shows the 'CAP Response' form in the Virginia Department of Behavioral Health & Developmental Services system. The form includes sections for 'Standard Cited', 'Description of Non-Compliance', and 'Final Planned Completion Date'. A red arrow points to the 'Upload Document' button, which is circled in red. Below the button are links for 'CAP Sample Document', 'Libs', and 'Delete'. The 'Actions to be Taken' section is also visible.

Step 9: Enter the description of the document in the **Document Description** field.



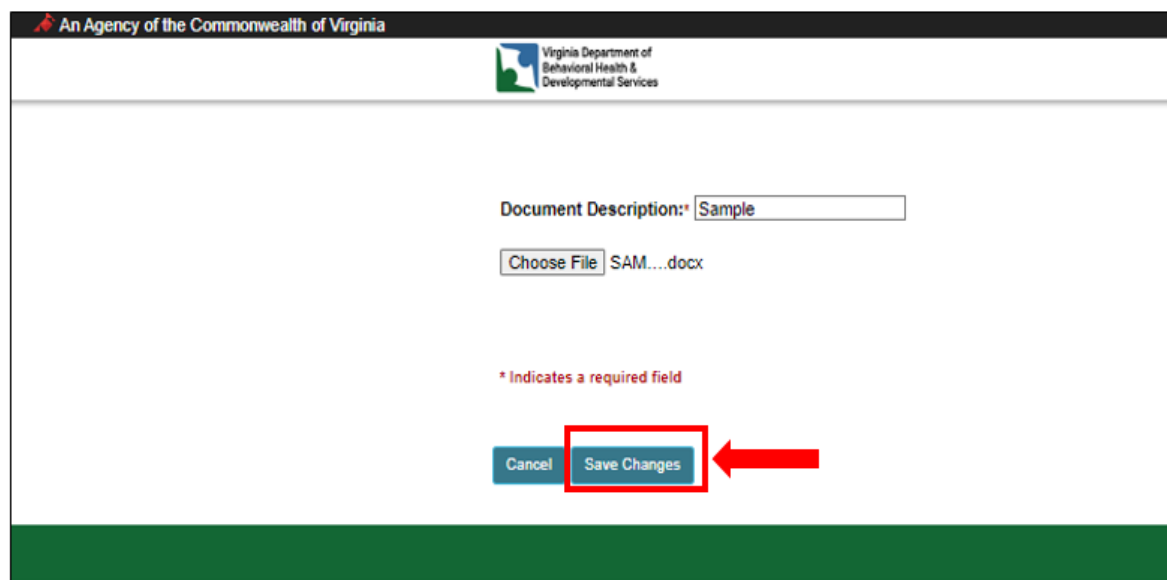
The screenshot shows the 'Document Description' field in the same system. The text 'Sample' is entered in the field, which is highlighted with a red box and a red arrow. Below the field is a 'Choose File' button and the text 'No file chosen'. At the bottom are 'Cancel' and 'Save Changes' buttons.

Step 10: Click the **Choose File** button to select the document from your computer to upload.



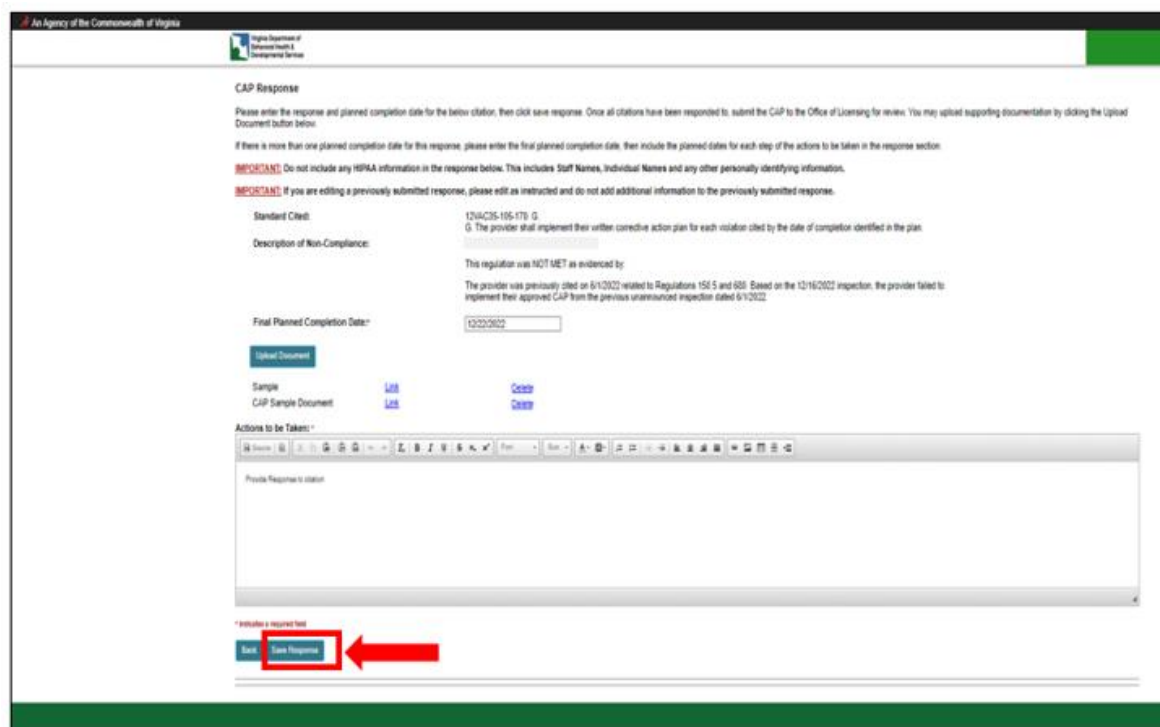
The screenshot shows a web form for document upload. At the top, there is a header with the text "An Agency of the Commonwealth of Virginia" and the logo for the "Virginia Department of Behavioral Health & Developmental Services". The main form area contains a "Document Description:" label followed by a text input field containing the word "Sample". Below this, there is a "Choose File" button, which is highlighted with a red rectangle and a red arrow pointing to it from the left. To the right of the "Choose File" button, the text "No file chosen" is displayed. Below the "Choose File" button, there is a red asterisk followed by the text "* Indicates a required field". At the bottom of the form, there are two buttons: "Cancel" and "Save Changes". The form has a green footer bar.

Step 11: Click the **Save Changes** button when finished uploading documents.



Note: Multiple documents may be uploaded by repeating these steps.

Step 12: Once the Actions to be Taken section is complete, click the **Save Response** button.



Note: Continue this process for **each** standard cited. **The Provider will not be able to submit the CAP until all citations associated with the licensing report have a response entered in the Actions to be Taken section.** Responses will be saved, and the CAP can continue to be edited as needed until the CAP is complete and submitted.

Step 13: To submit the completed CAP to the Office of Licensing, click the **Submit CAP** button.

Note: You will not be able to see the **Submit CAP** button until all citations have a response entered. You will not be able to edit responses once you submit the CAP. If there is a need to stop entering responses and return to the document later, the provider will need to click the **Save and Close** button.

Corrective Action Plan

Standard(s) Cited	Comp	Description of Non-Compliance	Actions to be Taken	Planned Completion Date	Status
12VAC35-155-175 G. 1. The provider shall implement their written corrective action plan for each violation cited by the date of completion identified in the plan.	Non-Compliant	This regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/2022 related to Regulations 155.5 and 680. Based on the 12/16/2022 inspection, the provider failed to implement their approved CAP from the previous unannounced inspection dated 6/1/2022.	PR: 12/06/2022 Provide Response to citation	12/30/2022	Pending Review
12VAC35-155-175 H. (1). The provider shall monitor implementation and effectiveness of approved corrective actions as part of its quality improvement program required by 12VAC35-155-625. If the provider determines that an approved corrective action was fully implemented, but did not prevent the recurrence of a regulatory violation, or correct any systemic deficiencies, the provider shall: 1. Continue implementing the corrective action plan and put into place additional measures to prevent the recurrence of the cited violation and address identified systemic deficiencies.	Non-Compliant	This regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/22 related to Regulations 155.5 and 680. Based on a review of the provider's Quality Improvement Plan, the provider did not monitor implementation and effectiveness of the approved corrective actions from the 6/1/22 unannounced inspection as part of its quality improvement program required by 12VAC35-155-625.	PR: 12/06/2022 Provide Response to 2nd Citation	12/30/2022	Pending Review

General Comments / Recommendations:

Please check that your responses are complete before submitting to the Office of Licensing. You may NOT make changes to your CAP response once you click the "Submit CAP" button.

Submit CAP

Step 14: The CAP will now show a **Status** of **Returned** and cannot be viewed again until the Office of Licensing completes their review of the provider's responses and re-issues to the provider. The Office of Licensing will review to determine if CAP responses are Accepted, Partially Accepted or Not Accepted. If a CAP is Partially Accepted or Not Accepted, it will be re-issued to the provider.

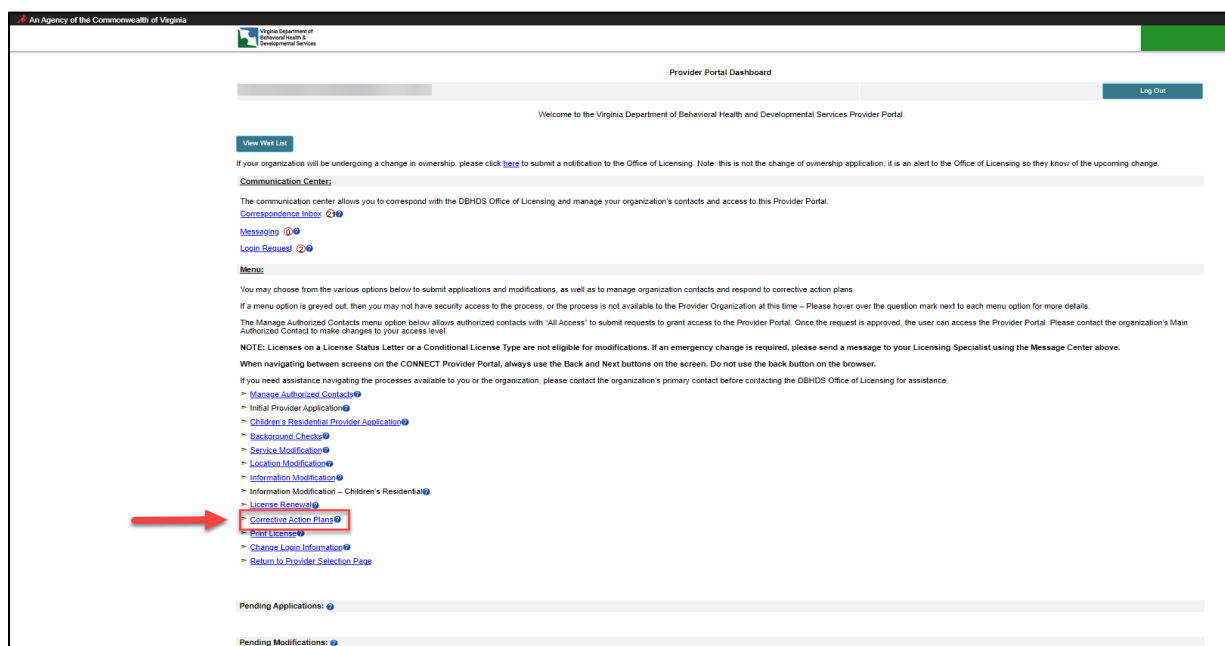
Inspection History				
Inspection Date	Service	Location	Due Date	Status
12/07/2022	07-006 - Outpatient Service /Crisis Stabilization			Returned
10/31/2022	07-006 - Outpatient Service /Crisis Stabilization			Complete - No Violations View CAP

[Return to Dashboard](#)

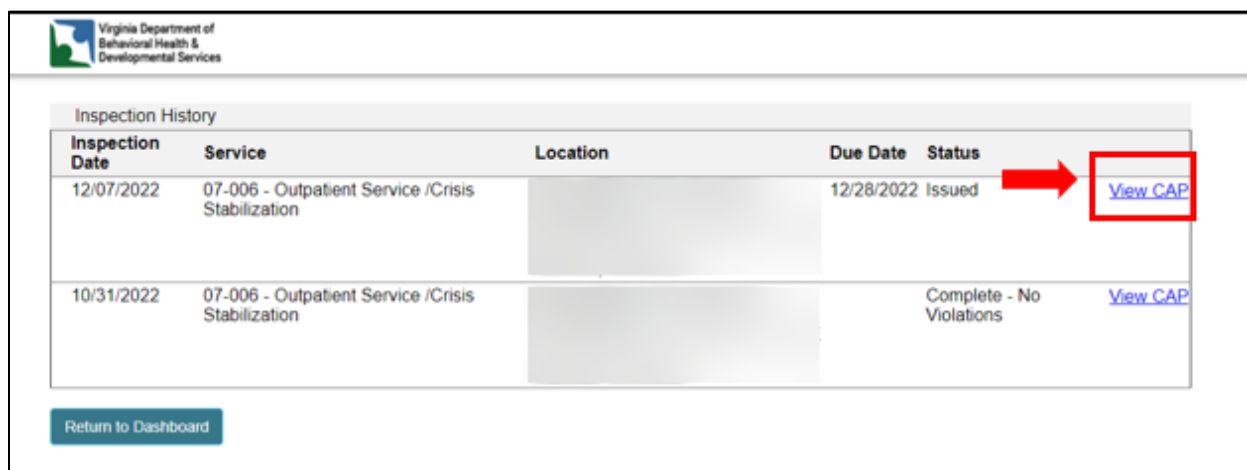
Section 4: How Do I Respond to a Re-Issued CAP that was Partially Accepted or Not Accepted?

CAP responses are reviewed by the licensing specialist to determine if the CAP is Approved, Partially Accepted or Not Accepted. If one or more responses are Partially Accepted or Not Accepted, the CAP will be re-issued, and the CAP response process begins again. The Provider will be notified through email that the CAP has been issued requiring revisions as indicated by the Office of License.

Step 1: To respond to the Corrective Action Plan (CAP) click the **Corrective Action Plans** link in the menu.



Step 2: From the Inspections History landing page, you will see completed and pending inspections. Click the **View CAP** link for those with a status of **Issued**.



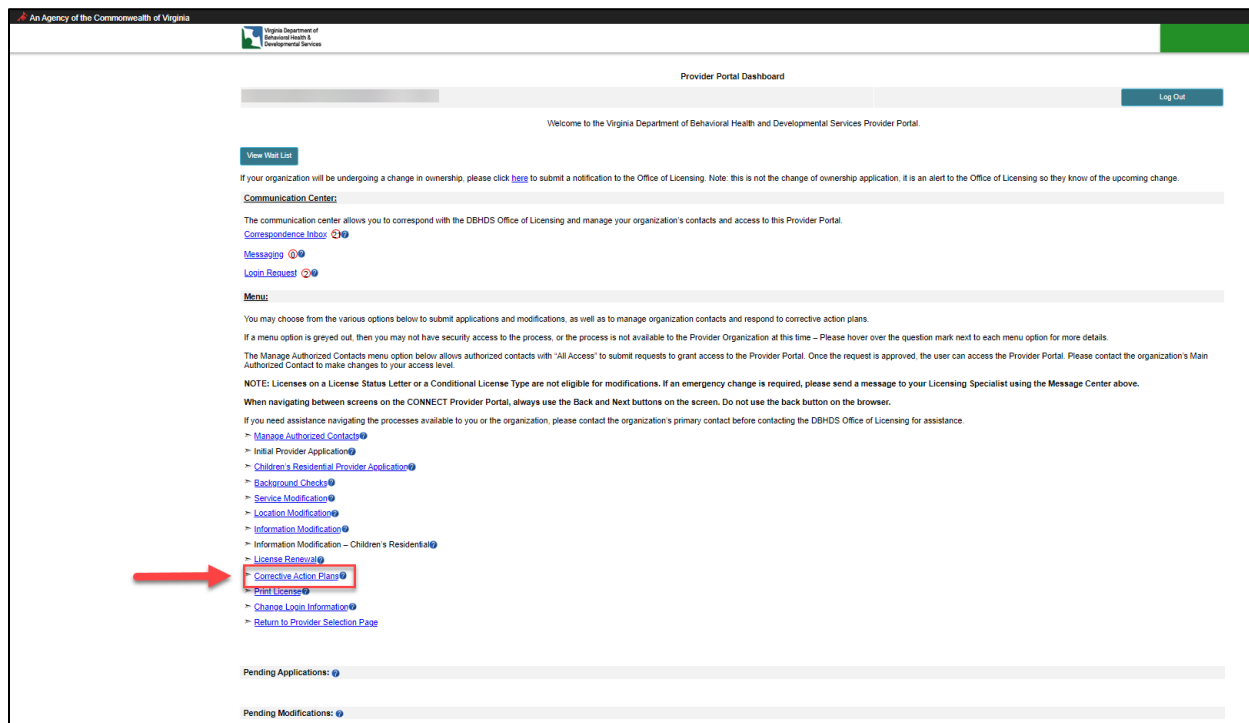
Step 3: The provider will need to submit additional information to the Office of Licensing for CAPs that were Partially Accepted or Not Accepted. Click the **Enter Response** link to enter the required response.

Planned Completion Date	Status	
12/22/2022	Accepted	
12/30/2022	Partially Accepted	Enter Response

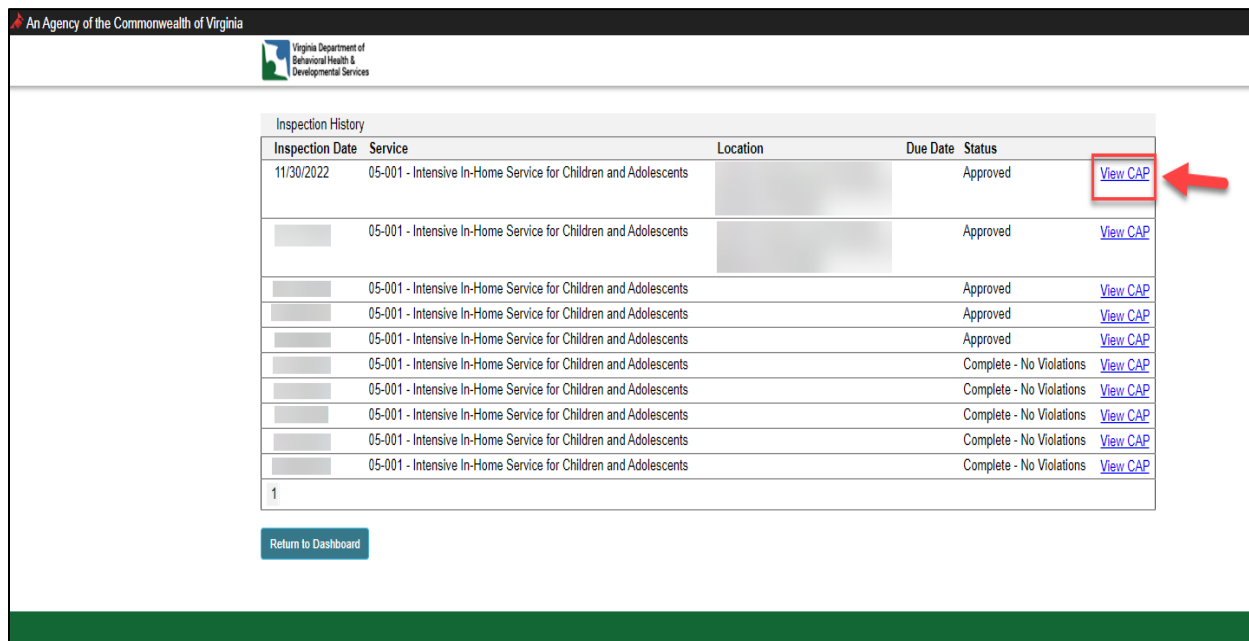
Step 4: Repeat the steps in Section 3, "How Do I Respond to a Corrective Action Plan (CAP)?"¹, starting at Step 3 to respond to the re-issued CAP.

Section 5: How Do I View an Approved CAP?

Step 1: From the Provider Portal Dashboard, click the **Corrective Action Plans** link in the menu.



Step 2: Click the **View CAP** link to view the approved CAP.



Step 3: The approved CAP will have an updated status of “Accepted” for each citation.

Agency of the Commonwealth of Virginia

Division of Professional Regulation Services

How to Respond to a CAP

CAP Due Date: 12/30/2022 [View Due Date/History](#)

License #: 45-001 Date of Inspection: 11/30/2022

Organization Name: Program Type/Facility Name: 05-001

[View CAP History](#)

[View Violation CAP History](#)

Instructions:

Review the Office of Licensing guidance to assist in the acceptance of your Corrective Action Plan (CAP). Select the Enter Response link to enter your CAP details.

- DO enter to staff by staff roles and/or employee identifiers referencing the CAP Form.
- DO ensure your responses to the CAP do not violate HIPAA practices, refer to the identifiers in the provided CAP Form.
- DO enter any new information after you have edited the previously submitted one by clicking Enter Response.
- DO provide a statement of the issue that led to non-compliance, a statement of how you corrected the issue, a plan of action to address systematic, gross/professional, that have been or will be implemented to ensure you remain in compliance of the regulation, and include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation, and indicate the frequency for monitoring the plan including how it will be monitored.
- If the CAP Response link displays, edit the previously submitted response as instructed by the Office of Licensing and ensure you enter a new response indicating you have made the edit.
- DO NOT change the original response beyond the specific item requested by the Office of Licensing.

Standards/Cited	Comp	Description of Non-Compliance	Actions to be Taken	Planned Completion Date	Status
12VAC35-185-170.5 D The provider shall implement their written corrective action plan for each violation cited by the date of completion identified in the plan.	Non-Compliant	This regulation was NOT MET as evidenced by: The provider was previously cited on 6/1/2022 related to Regulations 185.5 and 600. Based on the 12/30/2022 inspection, the provider failed to implement their approved CAP from the previous unannounced inspection dated 6/1/2022.	PR: 12/05/2022 Provide Response to citation OLR: Partially Accepted 12/06/2022 PR: 12/09/2022 Our organization has established a schedule to be monitored by the Director and the Assistant Director monthly on the first day of each month to oversee any staffing issues and to ensure adequate staffing. The Program Manager will be auditing all (new monthly) on the first day of the month and has completed the audit for 12/1/2022. The Administration team has established a schedule to meet monthly and quarterly to work to identify areas of opportunity to for quality improvement and to evaluate the implemented changes to ensure that our organization remains in compliance. Additional measures have been put in place to ensure compliance in each Department as well. The Department Manager must make a month to go over updates and training to share with their staff. OLR: Accepted 12/09/2022 OL Response Example: The CAP response is acceptable as it sufficiently details the process and procedures to prevent recurrence. Our organization has established a schedule to be monitored by the Director and the Assistant Director monthly on the first day of each month to oversee any staffing issues and to ensure adequate staffing. The Program Manager will be auditing all (new monthly) on the first day of the month and has completed the audit for 12/1/2022. The Administration team has established a schedule to meet monthly and quarterly to work to identify areas of opportunity to for quality improvement and to evaluate the implemented changes to ensure that our organization remains in compliance. Additional measures have been put in place to ensure compliance in each Department as well. The Department Manager must make a month to go over updates and training to share with their staff.	12/30/2022	Accepted
12VAC35-185-170.5 (1) The provider shall implement their written corrective action plan for each violation cited by the date of completion identified in the plan.	Non-Compliant		PR: 12/06/2022	12/30/2022	Accepted

Step 4: Click the **Save and Close** button once you have finished reviewing the Approved CAP.

This completes the **How Do I Respond to My Corrective Action Plan (CAP) in CONNECT?** job aid.