



ESRD ALLIANCE | NETWORK 18

Serving Southern California

Compliance Action Plan – Security Violation

Facility:

Facility CCN #:

Date:

Contact Person:

Phone:

**Identified Area(s)
to Improve:**

Mishandling of PII/PHI.

Instructions:

Provide as much detail as possible explaining any problems and steps that will be taken to ensure that a second Security Violation will not occur. Fax completed CAP and QUIZ to 888.280.8669.

Problems Identified	Actions and Steps	Resources	Person(s) Involved	How will I know if the change is making a difference?
