

Centers for Medicare & Medicaid Services

Internet Quality Improvement & Evaluation System (iQIES)

Survey and Certification (S&C)

Manage a Survey: Long Term Care Facilities

User Manual

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1. Introduction

This user manual addresses how to prepare, add, review, manage, and edit surveys for long-term care (LTC) facilities in iQIES. This manual is not for all other provider areas. Please review <u>Manage a Survey User Manual</u> for all other provider areas.

For information on other modules, refer to <u>Reference & Manuals</u> on QTSO.

1.1 Getting Started in S&C – Important Information to Know

Below is important general information about iQIES.

- Log in to iQIES at <u>https://iqies.cms.gov/</u> with Health Care Quality Information Systems (HCQIS) Access Roles and Profile (<u>HARP</u>) login credentials. Refer to <u>iQIES Onboarding Guide</u> for further information, if necessary.
- All screenshots included in this manual contain only test data. Current screens in iQIES may be different from what is shown in screenshots below.
- Screenshots are dependent on user role and may not be an exact representation.
- Words highlighted in blue are clickable links.
- A red asterisk (*) indicates a required field.
- Blank fields may have a limited number of characters allowed in that field. If so, the character limit is shown on the bottom left. The blank fields may also be expanded. Click the two 45° parallel lines and drag to the right to enlarge the box. See *Figure 1, Expandable Field*.



Figure 1: Expandable Field

• iQIES times out after 15 minutes of nonuse and reverts to the login page. Be sure to save data regularly. iQIES remains up and active as long as it is in use.

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- iQIES uses a smart search. Once three letters/digits are typed in the search bar, results are shown based on letters/digits entered. The more letters/digits entered, the narrower the search. If any of the results is the correct result, click the result to open.
- Review any notification banners. Some banners may have links to review further information; others may be a reminder of a task that must be completed. See *Figure 2, Notification Banner* and *Table 1, Notification Banner Color Descriptions.* These banners can be closed (X'd out) at any time.

If there are surveys that occured prior to the newly selected Cycle starting survey, please verify that these surveys still belong to the enforcement case.

Figure 2: Notification Banner

Notification Banner Color	Reason
Green	Action was successful
Blue	Informational only
Yellow	Warning. Review for information.
Red	Stop and review. The banner explains the actions must be taken.

Table 1: Notification Banner Color Descriptions

• Review any Tool Tips for additional information to perform an action. Hover over the **i** icon to see the tip. Tool Tips are in iQIES to communicate information. Look for the information icon. See *Figure 3, Tool Tip Icon.*



Figure 3: Tool Tip Icon

• Below are the supported browsers for access to iQIES. Be sure to keep your browser updated.

<u>Chrome</u> <u>Edge</u>

1.2 iQIES Service Center

The iQIES Service Center supports users working within the various iQIES components: S&C, Patient Assessment, and Reporting.

Assistance Accessing iQIES:	Contact the iQIES SO for your organization		
Technical Support:	Contact the iQIES Service Center:		
	Phone: 888-477-7876 (select Option 1) Email: <u>iQIES@cms.hhs.gov</u>		
Idea Portal:	Feedback for future iQIES software development: <u>CCSQ Support Central</u> . Click Idea Portals and select iQIES Idea Portal.		
More information on iQIES:	Refer to the <u>QIES Technical Support Office</u> (QTSO) and the <u>Quality, Safety, & Education</u> <u>Portal</u> (QSEP). Logging in to HARP may be required before accessing some documentation in QTSO and QSEP.		
	iQIES reference materials include:		
	 Links to Training Videos for providers Assessment Management User Manual Quick Reference Guides Onboarding Guide Managing User Information Other helpful iQIES material 		

iQIES training materials on QSEP include S&C Foundation Series Videos.

1.3 Roles and Permissions

iQIES roles allow users to access information pertinent to their area of work. The examples provided in this document pertain to S&C and require a Contract Surveyor, State Agency or Centers for Medicare & Medicaid Services (CMS) role with the capability to view or edit this information.

Permissions are ultimately governed by HARP access privileges. Contact the Security Official (SO) for your organization or the iQIES Service Center for issues relating to access and permissions. Refer to the <u>iQIES User Roles Matrix</u> for detailed information on roles.

For additional help, refer to <u>https://iqies.cms.gov/iqies/help</u> or click the help icon in the top right corner of the screen, see *Figure 4, Help Icon*, for further information.

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Figure 4: Help Icon

1.4 My Tasks Landing Page

- **Purpose:** My Tasks Landing Page is a tool used to track and display data for individual users. It consolidates information and processes into one area so that the user can see at a glance what actions must be performed.
 - 1.4.1 Log in to iQIES. The landing page displays the **My Tasks** tool. See *Figure 5, My Tasks Landing Page* and *Table 2, My Tasks Landing Page Detailed Callout*.
 - Note: The My Tasks landing page defaults to Active tasks. Click the drop-down menu and select Closed tasks to view completed tasks.

My Ta	isksa_						
Pro	viders Surveys	Intakes					.
1y Surve	ys Tasks			e		Active to	asks
Survey ID) ÷	Provider 🗄	Category 🔶	Exit Date 🛊	Assigned Tasks	Track Status 💠	
>	1A6456-H1	La Maison Suisse Deux 123 Main St Anytown, Florida 88990	Initial Certification	05/14/2024	Survey Team	1A6456	c
>	192B18-H1 New j	0 Lex 123 sycamore66662, fake22 Tallahassee, Florida 75485	Sample Validation	No information		<u>192B18</u>	

Figure 5: My Tasks Landing Page

Table	2 :	Mу	Tasks	Landing	Page	Detailed	Callout
-------	------------	----	-------	---------	------	----------	---------

No.	Name	Description
а	Survey tab	Click each tab (Providers , Surveys , Intakes) to review the respective tasks. Not all tabs are available in all user roles.
	Survey lab	Click Enable Offline to enable the survey offline. For more details on how to enable offline, refer to <u>S&C</u> <u>User Manual: Offline</u> .
b	Survey IDThe survey ID shows as a link directly under SuClick the link to go directly to the Survey BasicInformation page.	

No.	Name	Description	
		Click the caret next to the survey ID to view task status details about the survey. See step 1.4.2.	
С	Provider	The provider ID and address shows as a link directly under Provider . Click the link to go directly to the Provider Basic Information page.	
d Category Shows the survey category.		Shows the survey category.	
е	Exit Date	Shows the survey exit date.	
f	Assigned Tasks	Lists the assigned tasks	
g	Track Status	Tracks the completion status of the survey track. Click the status ID to see details. See <u>Certification Event</u> for a detailed explanation.	
h	Active/Closed Tasks Toggle between Active and Closed tasks.		
i	New	A blue New in an oval shape (badge) next to the Survey ID in the Survey tab indicates that the survey task's status is New .	

Notes:

• Click the iQIES logo on the top left of the screen or **Home** to return to the **My Tasks** landing page at any time. See *Figure 6, iQIES Logo*.



Figure 6: iQIES Logo

• If there are no tasks, then a message appears below the selected tab. See *Figure 7, No Active Tasks,* for an example from the **Surveys** tab.



Figure 7: No Active Tasks

1.4.2 Click caret next to the survey ID and details open about tasks assigned to the survey. See *Figure 8, Task Status Details* and *Table 3, Task Status Details Detailed Callout*.

1Aó45ó-H1 \oplus Enable Offline	La Maison Suisse Deux 123 Main St Anytown, Florida 88990	Initial Certification	05/14/2024	Survey Team	<u>1A6456</u> 0%
ASSIGNED TASK \$	DUE DATE \$	C TASK STATUS 🛊			COMMENTS \$
Letters	No information	To Do		~	Existing Comment 🖃
Review PoC	No information	To Do		~	No comment 🛨
Schedule Surveys	No information	To Do		~	Ð

Figure 8: Task Status Details

Table 3: Task Status De	ails Detailed Callout
-------------------------	-----------------------

No.	Name	Description
а	ASSIGNED TASK	The name of the task assigned.
b	DUE DATE	The date the task is due, if available.
С	TASK STATUS	The task status. Task statuses are: To Do, In Progress, Complete .
d	COMMENTS	Comments. A + (plus sign) indicates a comment has not been left. See <u>step 1.4.3</u> .

1.4.3 Click the + to leave a comment. The side menu opens. See *Figure 9, My Tasks Comments.*



Figure 9: My Tasks Comments

1.4.4 Click **Save** to save comments. The side menu closes.

2. Manage a Survey Overview

This user manual addresses how to prepare, add, review, manage, and edit surveys.

Limited information from surveys from all states can be viewed, but findings, intakes, notes, attachments, and letters cannot be viewed.

Survey information is organized in sections and described in detail in steps in the manual. Click any selection on the left menu to get to that section. See *Figure 10, Survey Data Information Section*.



Figure 10: Survey Data Information Section

3. Add a Survey

Notes:

- A survey must be added by a State Agency General User (SAGU) with appropriate permissions.
- Once the survey is complete, a Team Coordinator (TC) must be added. Refer to <u>Teams</u> for more information on how to add a TC.
- All surveys must have associated intakes added when creating the survey.

Add a Health Survey Add a Life Safety Code (LSC) Survey Link an LSC Survey to an Existing Health Survey Add a Federal Monitoring Survey (FMS)

3.1 Add a Health Survey

- **Purpose:** This section describes how to create a health survey that is not associated with an LSC survey. To create a health survey that is associated with an LSC survey, see Link a Health Survey and an LSC Survey.
- **Note:** An LSC survey does not have to be linked to a health survey for state surveys. Federal surveys must be linked to a health survey.
 - 3.1.1 Click the desired provider record. The **Provider History** page opens. For more information on searching for and accessing a provider, refer to the <u>Manage a Provider User Manual</u> on QTSO.
 - 3.1.2 Click Add Survey on the Provider History page. See *Figure 11, Add Survey*. The Basic Information page opens.



Figure 11: Add Survey

4.1.1 Select Health. See Figure 12, Health Survey Type.



Figure 12: Health Survey Type

4.1.2 Fill out the information. See Figure 13, New Survey Basic Information.

Notes:

- Grayed out areas cannot be filled out. They are disabled based on the provider's information.
- **Regulation Sets** are applicable to the survey category selected.
- Click **Show Older Regulation Sets** to see older regulation sets, if desired.

Basic Information				
Enter the basic information for this survey. To add open i category.	intakes choose 'Complaint' or 'Licensure Complaint' survey			
All required fields are marked with an asterisk (*)				
Survey Type * Health Ulfe Safety Code				
Survey Categories *				
Federal Categories	State Categories			
Initial Certification 🛈	initial Licensure			
Recertification	Re-Licensure			
Complaint ()	Licensure Complaint ()			
Focused infection Control				
Linked LSC Survey There are no Life Safety Code Surveys available to link to Surveys Extents	<i>this Health Survey at this time.</i>			
Survey extents are determined based upon the Federal Survey once citations are entered. Recommended extents are displayed	Categories and Citation Levels for this survey. If a survey extent is appropriate, it can be added d during the process of locking citations.			
Survey Extents 🛈				
Standard				
Abbrevlated				
Extended				
Partial Extended				
Under Under				
Regulation Sets *				
Federal Regulation Sets 🕕	State Regulation Sets 🕦			
Emergency Preparedness (FED - E - 1.04)	Alabama Licensure L T C (ST - L - 1.1)			
LONG TERM CARE FACILITIES (FED - F - 20.01)				
LONG TERM CARE FACILITIES (FED - F - 21.00)				
> Show Older Regulation Sets				
Survey Status				
Start Date * Exit Date				
MM/DD/YYYY MM/DD/YYYY				
Save Basic Information Cancel				

Figure 13: New Survey Basic Information

4.1.3 Click **Save Basic Information** to save new survey. The new survey opens.

Notes:

- CMS General Users will see a selection for Federal Monitoring Survey under Survey Categories.
- Once the survey is saved, a survey ID is generated.
- The H in the survey ID signifies a health survey. The 1 signifies that this is the first visit for this health survey. See *Figure 14, Health Survey ID Explanation*. Subsequent numbers represent revisit surveys. For example, the first revisit survey will have the same prefix, but it will be followed by H2. Each subsequent revisit health survey will have a number increase. See <u>Create a Revisit Survey</u> for further information about revisit surveys.



Figure 14: Health Survey ID Explanation

4.1.4 Click **Edit** in the top right corner to edit the survey, if desired.
3.2 Add an LSC Survey

Purpose: To create an LSC survey that is not associated with a health survey. To create an LSC survey that is associated with a health survey, see <u>Link a Health Survey and an LSC Survey</u>.

Notes:

Before an LSC survey can be created, the following must occur:

- A provider must be added to iQIES with its primary physical location.
- A building must be added to the provider. See the <u>Manage a Provider</u> <u>User Manual</u> on QTSO for further details, if needed.
- Each building has an LSC Form Indicator (LSC Regulation Set specific to provider types).
- 3.2.1 Click Add Survey on the Provider History page. See *Figure 15, Add Survey*. The Basic Information page opens.



Figure 15: Add Survey

3.2.2 Select Survey Type. See Figure 16, Survey Type.



Figure 16: Survey Type

Note: Verify whether **Locations** is set up if Life Safety Code is disabled (grayed out).

3.2.3 Fill out the information. Fields are dependent on the type of survey chosen.

Notes:

- Grayed out areas cannot be filled out. They are disabled based on the provider's information.
- **Regulation Sets** are applicable to the survey category selected.
- 3.2.4 Click **Save Basic Information** to save new survey. The new survey opens and can be edited.

- The L in the survey ID signifies an LSC survey.
- The **1** signifies that this is the first visit for this survey. See *Figure 17, LSC Survey ID Explanation*.



Figure 17: LSC Survey ID Explanation

3.3 Link a Health Survey and an LSC Survey

Purpose: To create an LSC survey that is associated with a health survey in order that both surveys have the same ID prefix. To create an LSC survey that is not associated with a health survey, see <u>Add an LSC Survey</u>.

Notes:

- There must be a building associated with the provider to link surveys. The Life Safety Code Survey Type radio button is disabled when there is no building associated with the provider.
- There must be an existing health survey to perform this action.
- The example below shows how to create a new LSC survey and link it to an existing health survey. The process works the same way when creating a new health survey and linking it to an existing LSC survey.
- 3.3.1 Go to the **Provider History** page for the provider.
- 3.3.2 Click **Create Life Safety Code Survey** under the **Survey action** menu on the survey line. See *Figure 18, Create Life Safety Code Survey.* The **New Survey Basic Information** page opens.

Provider History For more information on the deficiency history of a provider history report. View Provider History Report View All Provider Reports Provider Forms								
Add Form -								
Form Name 🕆	Status 🗄	Related Survey(s)	Created Date 🔅	Las	t Updated 🗘	Track ID 🕴		Actions
CMS-377	In Progress	СС837-Н1 🖪	12/06/2023	12/	96/2023	CC837	0%	Form action -
Recent Survey	5							
Sets & Survey ID 🕴	Survey Type 🔅	Survey Category 🔅	Exit Date 🗘	Status 🗧	Linked Survey 🗧	Track ID 🕴		Action
12870A-H1	Health	Recertification		New	No Linked Survey	12870A	0%	Survey action -
122C82-H1	Health	Validation Survey		New	No Linked Survey	122C82	Create Life S	afety Code Survey
1202BA-H1	Health	Validation Survey		New	No Linked Survey	1202BA	0%	

Figure 18: Create Life Safety Code Survey

Note: If there is an existing linked survey, the linked survey will show in the **Linked Survey** column.

3.3.3 Verify the linked survey is correct and fill out the information. Some information is prepopulated. See *Figure 19, Linked Health Survey Basic Information.*

Basic Information Enter the basic information for this survey. To add open intakes choose 'Complaint' or 'Licensure Complaint' survey category.						
All required fields are marked with an asterisk (*)						
Survey Type * O Health Iife Safety Code						
Survey Categories * Federal Categories State Categories Initial Certification ① Initial Licensure ① Recertification Re-Licensure Complaint ① Licensure Complaint ① Focused Infection Control ①						
Linked Health Survey *						
Survey ID	Survey Category	Survey Status	Exit Date			
O EFC36-H1	Recertification	New				
Edit Linked Survey						

Figure 19: Linked Health Survey Basic Information

- 3.3.4 Click **Save Basic Information** at the bottom of the form. The page returns to **Survey Basic Information** and can be edited.
 - **Note**: Both the Health and LSC surveys have the same survey prefix ID. The same ID helps locate the surveys. See *Figure 20, Linked Survey IDs.*

1 - 20 of 80 Surveys	^{1-20 of 80 Surveys} Note: The L and H show whether the survey is an LSC (L) survey or a Health (H) survey.					
Sets & Survey ID 🔅	Survey Type 🔅	Survey Category 🕴	Exit Date 🛊	Status 🔅	Linked Survey 🗧	Actions
EFC36-L1	Life Safety Code	Recertification		New	EFC36-H1	
EFC36-H1	Health	Recertification		New	EFC36-L1	
EFC0C-H1	Health	Recertification		New	No Linked Survey	Survey action -
EE1E1.H1	Health	Perertification		Now	No Linked Survey	Survey action T

Figure 20: Linked Survey IDs

3.4 Add a Federal Monitoring Survey (FMS)

- An FMS can only be created and edited by a CMS General User (CMSGU). A revisit survey with an FMS can be created by the SAGU.
- Only CMSGUs can add an attachment.
- There must be a linked Health survey.
- The CMSGU can restrict the SAGU from viewing the FMS.
- 3.4.1 Click Add Survey on the Provider History page. The Survey Basic Information page opens.
- 3.4.2 Select **Federal Monitoring Survey**. See *Figure 21, Federal Monitoring Survey*.
- 3.4.3 Fill out the rest of the information.
- 3.4.4 Click Save Basic Information.

Basic Information	
Enter the basic information for this survey. To add open in	takes choose 'Complaint' or 'Licensure Complaint' survey category.
All required fields are marked with an asterisk (*)	
Survey Type *	
O Health	
C Life Safety Code	
-	
Survey Categories *	
Federal Categories	State Categories
Initial Certification	Initial Licensure
Recertification (i)	Re-Licensure
Complaint (i)	Licensure Complaint (j)
Federal Monitoring Survey	
Focused Infection Control	

Figure 21: Federal Monitoring Survey

4. Delete a Survey

Purpose: To delete a survey that should not be in the system.

Notes:

- Only State Security Officials who are also SAGUs can delete a survey.
- Once a survey is deleted, it cannot be reinstated.
- Surveys cannot be deleted under the following conditions:
 - o When a survey has citations
 - When a survey has an IDR
 - When a survey has a POC
 - When a survey has CMS-670 time entered

Note: To remove time from the CMS-670, follow instructions in the <u>Manage a Form User Manual</u> on QTSO.

- If the survey is associated with:
 - A revisit
 - An FMS
 - An enforcement
- There may be other circumstances when a survey cannot be deleted without additional actions. Pay attention to the red notification banners. The banners explain what the issue is and show a link as to where to go to resolve the specific condition, if possible.
- Contact the <u>iQIES Service Center</u> if there is an enforcement attached to the survey.
- Surveys can be deleted when an intake is associated with it.

- Only Designated State and CMS Users can perform the actions in steps 4.1 and 4.2 below.
- CMS staff must follow the following process to request the deletion of a survey created by CMS staff:
 - Send an email to: <u>iqiessogdelreq@cms.hhs.gov</u>
 - Copy user's manager
 - Include the Event ID, the CCN, the name of the provider and a statement that none of the conditions listed in the third note above exists for the survey being deleted.
- 4.1 Click Delete this survey under Survey action on top right of BasicInformation screen. See *Figure 22, Delete a Survey*. The Delete survey?pop-up window opens.

=	Status Statement of Deficiencies sent	Category Initial Certification	Start Date 12/01/2021	Exit Date 12/02/2021	Revisit Status Required	Survey action ~
Home Health Agency Non-Deemed	Basic Information Manage the basic information for	this survey.				Delete this survey Edit
Basic Information	Survey Type			Health		
Responsible Staff				25/0/01		
Teams	Survey Categories					

Figure 22: Delete a Survey

Note: When a survey cannot be deleted, a red notification explains the reason why. See *Figure 23, Survey Cannot Be Deleted.* Click the link in the notification to review the specific citation or enforcement.

Ξ	Home / Search /	ome / Search / /								
_	Status Statement of Deficiencies sent	Category Recertification	Buildings	Start Date 04/01/2022	Exit Date 04/02/2022	Revisit Status Recommended	Survey action +			
Ambulatory Surgical Center Non-Deemed	Survey cannot be deleted while citations are st	t be deleted while citations are still added.								
Basic Information	Survey cannot be deleted while associated with	• Survey cannot be deleted while associated with an enforcement.								
Responsible Staff										
Teams	Basic Information						Edit			
	Manage the basic information for	this survey.								
Citations Statement of Deficiencies	Survey Type Enforcement Case ID			Life Saf <i>No info</i>	ety Code					

Figure 23: Survey Cannot Be Deleted

4.2 Click **Yes, delete**. See *Figure 24, Delete Survey? Pop-up Window*. The survey is deleted.



Figure 24: Delete Survey? Pop-up Window

5. Basic Information

Purpose: The Basic Information page is the landing page when a survey is opened.

5.1 Click **Edit** to edit **Basic Information**. The information shows the editable areas. See *Figure 25, Edit Button*. See *Figure 26, Basic Information Edit Screen*.



Figure 25: Edit Button

5.2 Click Save Basic Information to save changes.

Basic Information	
wanage the basic information for this survey.	
All required fields are marked with an asterisk (*)	
Survey Type Health	
Survey Categories * Survey categories that are associated with citations cannot be removed.	
Federal Categories	State Categories
Initial Certification ①	Initial Licensure
✓ Recertification (i)	Re-Licensure
Complaint 🛈	Licensure Complaint
Federal Monitoring Survey ①	
Focused Infection Control (i)	
Survey Extents	
Survey extents are determined based upon the Federal Survey Categories and Cita once citations are entered. Recommended extents are displayed during the proces	tion Levels for this survey. If a survey extent is appropriate, it can be added s of locking citations.
Survey Extents (i)	
Standard	
Abbreviated	
Extended	
Open Inteller to Include in Complete Surrou *	
✓ Incident 1077102 [7] ①	
✓ Complaint 1078501 2 ①	
Regulation Sets *	
Federal Regulation Sets	itate Regulation Sets 🛈
Emergency Preparedness (FED - E - 1.04)	Alabama Licensure L T C (ST - L - 1.1)
LONG TERM CARE FACILITIES (FED - F - 20.01)	
> Show Older Regulation Sets	
Survey Status	
Start Date () Exit Date	
06/25/2024	
MM/DD/YYYY MM/DD/YYYY	
Survey Status *	
Open	
Closed (i)	
Survey Due Date	
09/06/2024	
Save Basic Information Cancel	

Figure 26: Basic Information Edit Screen

6. Responsible Staff

Purpose: Add new, delete, or view existing staff responsible for the survey.

- **Responsible Staff** are HARP ID users.
- The **Responsible Staff** section is available for CMSGUs or SAGUs with a Survey Admin Role. Other users will not see this item on the left menu.
- **6.1** Click **Responsible Staff** on the left menu. The **Responsible Staff** screen opens. See *Figure 27, Add Responsible Staff*.

Basic Information							
Responsible Staff	Status	Category	Start Date	Exit Date	Revisit Status	Track Status	
Manage Tasks	writing in progress	 Initial Certification Initial Licensure 	03/18/2024	03/25/2024	Not Determined	140BBA 0%	Survey action *
Teams							
	Baspansible	o Stoff					
LTCSP	Add and manage the	responsible staff for this sur	yoy This includes	all staff involver	in this survey that ar	a not part of the support of	
Survey Prep 🗸 🗸 🗸	Add and manage the	responsible starr for this sur	vey. mis meldues		ini and survey alocal	e not part of the survey tet	
Interview ~	Add Staff						
Resources 坐							
	2 Staff Mombors						
Citations							
Statement of	Name 🔶	o	rganization 👙	Ass	igned Tasks		Actions
-poc ()	abeck. Pat	C	MS	Nor	0		Actions -
ePOC ()		C.	WD	Nor			
Resolution							
Independent Informal							
Plan of Correction							
CME 1520							
CMIS-1539							
CMS-670							
;,,≥ CMS-671							

Figure 27: Add Responsible Staff

6.2 Click Add Staff. The Add Responsible Staff screen opens. See Figure 28, Add Responsible Staff Screen.

Add Re Find and add	Add Responsible Staff Find and add the responsible staff for this survey.							
First Name	Last Name	Organization						
		Select V						
Search 1 - 20 of 159	5 Staff Members							
Select	Name 🛊	Organization 💠						
	1, Pat	CMS						
	207e3a13-23f7-4da8-a5d6-143ad1dfba2d, Pat	CMS						
	7093097f.o50o.48f0.996h.74771a491oho Pat	CMS						

Figure 28: Add Responsible Staff Screen

- 6.3 Type last name in text box under Last Name. Add First Name or Organization to narrow down the results, if necessary.
- 6.4 Click Search. The search results appear below.
- 6.5 Check the box under **Select** next to the correct name. Click **Save**.

- It is only possible to add staff that are in the list of staff members. It is not possible to add someone manually.
- Click the arrow next to **Name** to sort names in alphabetical or reverse alphabetical order.

6.6 Verify the staff member was added. *Figure 29, Verify Responsible Staff.*

Responsible Staff Add and manage the responsible staff Add Staff 2 Staff Members	for this survey. This includes al	l staff involved in this survey that are not part of the su	irvey team.
Name 💠	Organization 🛊	Assigned Tasks	Actions
abeck, Pat	CMS	None	Actions -
NH_SAGU_Admin_Singy, Pat	State	None	Actions -
			Delete Edit Tasks

Figure 29: Verify Responsible Staff

6.7 Click **Edit Tasks** under the **Actions** menu to add or remove tasks for Responsible Staff. The Edit Tasks window opens. See *Figure 30, Edit a Responsible Staff*.

Edit Tasks - NH_ActiveProviderRole_Singy, Pat	×
Add and remove task(s) for this staff member in this provider.	
Providers	
Provider Maintenance	
Scheduling Branch Approver	
Save Cancel	

Figure 30: Edit a Responsible Staff

- 6.8 Check the box next to any task to add the task to the Responsible Staff.Note: Click the check box again to remove the check mark and remove a task for the Responsible Staff.
- 6.9 Click Save to save updates.

Note: Save is grayed out until a selection is chosen.

6.10 Click **Delete** under **Actions** to delete a staff member. A confirmation pop-up window opens. See *Figure 31, Delete a Responsible Staff*.



Figure 31: Delete a Responsible Staff

- 6.11 Click Delete.
- 6.12 Verify that the **Responsible Staff** is no longer on the list.

7. Manage Tasks

Purpose: To manage and assign tasks for Responsible Staff.

Click **Manage Tasks** on the left menu. The **Manage Tasks** screen opens. See *Figure 32, Manage Tasks*. See *Table 4, Manage Tasks Detailed Callout*.

Basic Information	Manage Tasks	your recoonsible staff				
Responsible Staff	Warrage and assign tasks for	your responsible starr			-	
Manage Tasks	Tasks				Filter 2	
Teams	All × Search tasks	× ~			View All	~
LTCSP	3	4	5	6	7	
Survey Prep 🗸 🗸 🗸 🗸	Task	Due Date	Status	Assigned To	Commen	nts
Interview ~						
Investigation ~	Schedule Surveys	01/01/2025	Completed	${\sf NH_SAGU_Admin_Singy, Pat} \times {\sf Assign Staff}$	× • 主	
Resources 坐						
Citations	Letters	mm/dd/yyyy	🕑 To Do	NH_SAGU_Admin_Singy, Pat \times Assign Staff	× × ±	
Statement of Deficiencies						
ePOC (i)						
Informal Dispute Resolution	Send 2567	mm/dd/yyyy	C To Do	NH_SAGU_Admin_Singy, Pat × Assign Staff	× •	
Independent Informal Dispute Resolution						
Plan of Correction	Review PoC	mm/dd/yyyy	O To Do	NH_SAGU_Admin_Singy, Pat × Assign Staff	× 🗸 🛨	

Figure 32: Manage Tasks

Table 4: Manage Tasks Detailed Callout

No.	Description
1	Select individual tasks from the drop-down menu under Tasks to assign to the Responsible Staff or select All
2	Select View All, Assigned , or Unassigned from the drop-down menu. View All is the default.
3	Each task that is selected shows under Task
4	The Due Date of the task
5	The Status of the task.
6	The Responsible Staff assigned to the task. More than one Responsible Staff can be assigned the task.
7	Click the + icon to add a comment. Click the letter icon to view an existing comment or to add a new comment.

8. Teams

Purpose: Add, edit, or review staff who perform surveys, write citations, send statements of deficiency, and review plans of correction.

Notes:

- There must be a TC for each survey. If no TC is selected, then the first staff member on the list is designated TC.
- A user must be added to the Team to view the Survey details.
- A Contract Surveyor user role can only view Team members.
- When a specific role is required to be on the team, an orange warning message appears on the top of the screen. Click the **X** to remove the notice.
- QA Team members are assigned in Teams and are given permissions to act on behalf of surveyors on the survey team for specific functions.
- QA team members can add and manage team members' <u>Citations</u>.
- QA team members can add and manage team members' time in CMS-670. Refer to the <u>Manage a Form User Manual</u> for more information, if needed.
- 8.1 Click **Teams** on the left menu. See *Figure 33, Teams*. The **Teams** window opens.

Home Health Agency Non-Deemed	A Registered Nurse is required for the Survey Team	2
Basic Information Responsible Staff Teams	Teams Add and manage the team members for this survey.	
Citations Statement of Deficiencies Informal Dispute Resolution Plan of Correction Letters	There are no team members for this survey. Add Team Members	
Notes Attachments		



8.2 Click Add Team Members to add a new person to the team. The Add Teams window opens. See *Figure 34, Add Teams*.

Notes:

• Members can be added to both the **Survey Team** and the **QA Team**. Click the desired team at the top of the page to add a staff member.

Add Teams Survey Team Select staff members for	QA Team this survey. The first staff member selec	ted will be designated as team coc	ordinator by default.
First Name	Last Nar	ne	Organization
			Select one ~
Disciplines Select Search 1 - 20 of 30 Staff member	¢ .		
Selected Name	\$	Organization \$	Disciplines
amd, F	at	CMS	Registered Nurse, Licensed Practical (Vocational) Nurse, Home H
ashlay	doles28uv_Pat	CMS	Laboratorian, Registered Nurse, Medical Records Administrator

Figure 34: Add Teams

• QA Team members must have a team function. Click the team member, then choose from the drop-down menu under **Team Function**. See *Figure 35, Add a QA Member*.



Figure 35: Add a QA Member

8.3 Type last name in text box under **Last Name**. Add first name to narrow down the results, if necessary.

- It is only possible to add staff that are in the list of staff members.
- Click the arrow next to **Name** to sort names in alphabetical or reverse alphabetical order.
- 8.4 Click **Search**. The search results appear below.
- 8.5 Check the box under **Select** next to the correct name.
- **8.6** Click **Save**. A green notification banner appears at the top of the screen, verifying the member was successfully added. See *Figure 36, Survey Team Member Successfully Added Popup*.



Figure 36: Survey Team Member Successfully Added Popup

- **8.7** Click **Delete** under **Actions** to delete a team member. See *Figure 37, Delete a Team Member*. A confirmation pop-up window opens. See *Figure 38, Deletion Confirmation Popup*.
 - Note: The Team Coordinator role cannot be deleted (there must be a Team Coordinator). The Team Coordinator role can be assigned to another team member and then that person can be deleted. The Team Coordinator has a blue circle next to their name.

4 Staff Members					
Team Coordinator	Name ≑	Disciplines	Management Unit	Work Unit	Actions
0	"TEST.2AK- SAGU-VA", Pat	Registered Nurse	None	None	Delete
0	"ajmaines", Pat		None	None	Delete
0	"test2.npeta ", Pat		None	None	Delete
0	"testsasb", Pat	Physical Therapist	NON LONG TERM CARE	HOSPI- TAL UNIT	Delete

Figure 37: Delete a Team Member



Figure 38: Deletion Confirmation Popup

- 8.8 Click Delete.
- **8.9** Verify that the team member is no longer on the list.

9. Certification Event

Purpose: To organize certification documents for provider certification.

Note: It may be necessary to refresh the page to update track status when changes are made.

View Certification Progress in My Tasks

View Certification Progress in Survey

View Certification Progress in Provider History Page

- 9.1 View Certification Progress in My Tasks
 - 9.1.1 Go to My Tasks.
 - 9.1.2 Click the **Survey** tab.
 - 9.1.3 View certification status under **Track Status** for each survey in My Tasks.
 - 9.1.4 Click survey number to view details. See *Figure 39, My Tasks Track Status.*

Track Status 🗧	
<u>192B18</u>	
AF1F4 60%	1

Figure 39: My Tasks Track Status

9.1.5 Click the survey number to view detailed certification status. The track status for the selected survey opens.

9.1.6 View track status details: Click the carets next to the survey number or **Track Forms** to view additional details. See *Figure 40, Detailed Certification Status.*

Track 1CCD24 Status								
Survey 1CCD24-H	1							
Name	Status	Completed Date						
CMS-670	် Not Started							
CMS-2567	Complete	08/02/2024						
Revisit	ි Not Started							
Closed Status	In Progress	-						
Track Forms								
Name	Status	Completed Date						
CMS-1539	Complete	08/07/2024						
		Close						

Figure 40: Detailed Certification Status

9.2 View Certification Progress in Survey

Go to the **Survey Basic Information** page. See Figure 41, Survey Basic Information Page Certification Progress and Table 5, Survey Basic Information Page Certification Progress Detailed Callout.

Nursing Home	Status Category Start Date Exit Date Revisit Status Track Status Statement of Deficiencies sent • Recretification 06/10/2024 08/01/2024 Created - 1C5733-H2 Track Status
Responsible Staff Manage Tasks Teams	Basic Information Manage the basic information for this survey.
LTCSP Survey Prep × Initial Pool ×	E Citations Health
Investigation ~ Resources 날	Statement of Deficiencies • Recertification • Complaint s ePOC ① No information
Citations Statement of Deficiencies	Informal Dispute vey • Complaint 1012687 Resolution • Incident 1012688
ePOC (i) Informal Dispute Resolution Independent Informal	S Independent Informal Dispute Resolution • Standard • Extended
Dispute Resolution Plan of Correction) CMS-1539	CMS-1539 LONG TERM CARE FACILITIES (FED - F - 19.00) CMS-670
 ✓ CMS-670 ◆ CMS-671 Letters 	CMS-671
Notes	Survey Status Open

Figure 41: Survey Basic Information Page Certification Progress

Table 5: Survey Basic Information Page Certification Progress Detailed Callout

Callout	Action					
	The left menu shows the status at a glance.					
	No fill Not Started: Form or information hasn't been started					
d	Yellow fill	In Progress: Form or information has been started, but it is incomplete				
	Green fill	Complete : Form or information is complete				
	The gray status bar shows the certification track status.					
b	information on certification status. See <u>Track Status</u>					
	Details for m	ore information.				

9.3 View Certification Progress on Provider History Page

9.3.1 Go to the **Provider History** page. See *Figure 42, Provider History Page Certification Progress*.

Provider Hist	Ory the deficiency his	story of a provi	ider, view the pro	vider history report.						
View Provider Histo	ry Report	View All Prov	vider Reports							
Provider Forr Add Form -	<mark>ns</mark>									
Form Name 🔶	Status 🔅	Related Su	urvey(s)	Created Date 🗍	Last Updated 🝦		Track ID	Å. T		Actions
CMS-1572	Complete	EFCF9-H1	ď	04/28/2022	04/28/2022		EFCF9	25%	Form	n action +
Recent Surve	<mark>ys</mark>									
Sets & Survey ID 💠	Survey Ty	pe ÷	Survey Categor	y ‡	Exit Date ≑	State	15 ÷	Track ID 🗘		Actions
I0HH11	Health		Initial Licensure,	State Licensure	10/29/2008	New		юнн	0%	
F423-A1	AO		Full Accreditatio	n Survey	02/06/2014	Close	d	F423	50%	
EFCF9-H1	Health		Recertification			New		EFCF9	25%	
									View All	Surveys (7)

Figure 42: Provider History Page Certification Progress

9.3.2 Click survey number under **Track Status** to see detailed information on certification status. <u>Review Track Status Details step</u> for further details.

10. Surveyor Notes

Purpose: To document Surveyor Notes during the survey. Surveyor Notes are specific to a survey team member.

General Notes

- Surveyor Notes are not the same as the **Notes** selection on the left menu. Refer to the <u>Notes section</u> in this document for further details.
- Any survey team member can add or view a Surveyor Note. Surveyors can only edit or delete their own Surveyor Notes.
- Surveyor Notes have a history of all Surveyor Notes entries. Refer to <u>Custom</u> <u>Toolbar Functions</u> for more details on how to view Surveyor Notes history.

Navigate to Surveyor Notes

- Surveyor Notes can be accessed and viewed in all LTCSP screens.
- Click the Surveyor Notes icon on the top right of the screen to open Surveyor Notes. The icon is located directly under the user name. See *Figure 43, Surveyor Notes Icon.*



Figure 43: Surveyor Notes Icon

• Surveyor Notes defaults to opening on the right. Click the Surveyor Notes bottom menu icon to open the Surveyor Notes on the bottom of the page. See *Figure 44, Surveyor Notes Bottom Screen Icon.*

Surveyor Notes									
1020	ж	D	6	ð	в	Ι	Ū	<u>~</u> ~	

Figure 44: Surveyor Notes Bottom Screen Icon

- Surveyor Notes can be resized on the screen by dragging the left line (when the notes are on the left) or the top line (when the notes are on the bottom) of the Surveyor Notes panel. Hover over line until the directional arrows are shown, then drag the line in either direction.
- Surveyor Notes can be left open while navigating to other LTCSP screens.

Create a Surveyor Note

- Click in the Surveyor Notes text area to create a Surveyor Note.
- A date/time stamp is automatically inserted when the surveyor starts to type in the text area when the text area is blank. Click Date/Time Stamp icon to insert date for additional notes.
- Type notes. See Figure 45, Sample Surveyor Note.



Figure 45: Sample Surveyor Note

- Surveyor Notes are autosaved.
- The Last saved date and time shows at the bottom of the Surveyor Notes. See *Figure 46, Surveyor Notes Last Saved Date and Time.*

Γ		Sur	veyo	r Note	es												
	Ŀ	ଓ	8	O	ж	ŋ	6	\rightarrow		в	I	Ų	<u>*</u>	×			
0 V	5/3 /as (0/20 disco	24 4 nnec	:39 PN cted.	M Prior	to the v	visit, I	attem	npte	d to	call	the a	admi	inist	rator, t	but th	e phone
	La	st sav	ed: 0	5/30/2	2024 4:5	8 PM											

Figure 46: Surveyor Notes Last Saved Date and Time

Custom Toolbar Functions

There are 4 custom toolbar options among the normal standard formatting options. See *Figure 47, Surveyor Notes Custom Toolbar Functions*.



Figure 47: Surveyor Notes Custom Toolbar Functions

From left to right they are:

- o View All Surveyor Notes
- o Insert Date/Time Stamp
- o Insert Resident ID
- o Notes History

Note: Hover over the icon to see the name of the icon.

View All Facility Notes

View all team member's Surveyor Notes. See *Figure 48, View All Surveyor Notes*. Click any name to view the Surveyor Note. Surveyor Notes are not editable.



Figure 48: View All Surveyor Notes

Click **My Notes** to return to the user's Surveyor Notes.

Insert Date/Time Stamp

Insert the current date/time at the cursor placement.

Insert Resident ID

Select **Resident ID** to be inserted into the Surveyor Notes. Multiple residents can be selected.

Notes History

View a history of all autosaved Surveyor Notes entries. If a previously saved entry is deleted in error, it can be accessed from the Surveyor Notes History and copied and pasted into the current Surveyor Notes.

<u>Help</u>

There is also a help icon on the toolbar which can be accessed for additional information as well as keyboard shortcuts. See *Figure 49, Surveyor Notes Formatting Menu.*



Figure 49: Surveyor Notes Formatting Menu

Note: Click the horizontal ellipsis to view the second row of formatting options.

11. Add Immediate Jeopardy

Purpose: To add immediate jeopardy (IJ) to a citation as soon as the IJ is discovered.

- The IJ button is available on every LTCSP screen.
- Any survey team member can add IJ and edit existing tags.
- **11.1** Click **IJ** icon on top right of screen. See *Figure 50, IJ Icon*. The **IJ Template** pop-up window opens. See *Figure 51, IJ Template Pop-Up Window* and *Table 6, IJ Template Pop-Up Window Detailed Callout*.

			_
IJ	=+	2+	
	_		_



IJ Templates					
	Q Search	a			
	b	0	d	0	
0	Tag 🍦	Tag Title	Last Updated 🍦	Edit	
0	<u>F0550</u>	Resident Rights/Exercise of Rights	01/10/2025, 12:10:50 PM	1	
0	<u>F0551</u>	Rights Exercised by Representative	11/11/2024, 05:13:12 PM	1	
0	<u>F0610</u>	Investigate/Prevent/Correct Alleged Violation	11/07/2024, 04:19:02 PM	1	
0	<u>F0602</u>	Free from Misappropriation/Exploitation	11/07/2024, 04:16:26 PM	1	
0	<u>F0554</u>	Resident Self-Admin Meds-Clinically Approp	09/18/2024, 06:06:25 PM	1	
	Select Tem	plates 🛓 🕴	Cancel g Add IJ Ter	nplate	

Figure 51: IJ Template Pop-Up Window

No.	Name	Description	
а	Search	Search for a specific template	
		The tags that appear are tags that already have information added to them.	
b	Тад	Select the radio button next to Tag to select all the tags.	
		Click the tag link for tag details including Regulation Text and Interpretive Guidance .	
С	c Tag Title Name of F-tag		
d	Last Updated	Date last updated in the system	
е	Edit	Edit template with details, including date, time, noncompliance, need for action	
Select Templates/ f Download Templates		 Select Template is disabled until a Tag is selected. Once a tag is selected, Download Templates becomes active. Note: More than one tag can be selected. Click to download PDF. 	
g Add IJ Template Click to add additional tags		Click to add additional tags	

Table 6: IJ Template Pop-Up Window Detailed Callout

- **11.2** Click the radio circle next to the F-tag.
- **11.3** Click **Add IJ Template**. The **Select Regulation** pop-up window opens. See *Figure 52, Select Regulation Pop-Up Window*.

Note: Click the checkbox next to **Add another citation after save** to add more than one citation.

11.4 Select or search for a tag.

← Select Regulation ×	:
Q Search	
	1
Tag 🌲	
F0000 INITIAL COMMENTS	
O F0540 Definitions	
F0552 Right to be Informed/Make Treatment Decisions	
F0553 Right to Participate in Planning Care	
F0555 Right to Choose/Be Informed Attendg Physician	
F0557 Respect, Dignity/Right to have Prsnl Property	
F0558 Reasonable Accommodations Needs/Preferences	
F0559 Choose/Be Notified of Room/Roommate Change	
F0560 Right to Refuse Certain Transfers	
O F0561 Self-Determination	
O F0562 Immediate Access to Resident	
F0563 Right to Receive/Deny Visitors	
Add another citation after save Cancel Next	

Figure 52: Select Regulation Pop-Up Window

11.5 Click Next. The Template Edit pop-up window opens and can be edited. See Figure 53, IJ Template Edit Pop-Up Window and Table 7, Select Regulation Pop-Up Window Detailed Callout.

Note: Next is disabled until a Tag is selected.

ד →	emplate Edit (i) a ×
b >	F0559 - Choose/Be Notified of Room/Roommate Change LONG TERM CARE FACILITIES (FED - F - 20.00)
Date/Time	IJ Template provided to entity
MM/DD/YY	YY
Noncomp	liance
Has the er If yes, in th determina includes th example, r	tity failed to meet one or more federal health, safety, and/or quality regulations? The blank space, identify the tag and briefly summarize the issues that lead to the tion that the entity is in noncompliance with the identified requirement. This the action(s), error(s), or lack of action, and the extent of the noncompliance (for number of cases). Use one IJ template for each tag being considered at IJ level.
OYes €No	
Add ar	nother citation after save

Figure 53: IJ Template Edit Pop-Up Window

No.	Name		Description	
а	Information button de		Click information button and the IJ Template Instructions pop-up window opens with detailed template instructions.	
b	Tag caret	Click caret for Regulation Text and Interpretive Guidance .		
с	Scroll bar	Scroll to the bottom of the pop-up window to view all the questions in the window.		
d	Add another citation after save	Check	Check the box to add an additional citation.	
е	Save	Click t	o save.	

11.6 Fill out the information.

11.7 Click **Save**. The citation is added to the survey and the **IJ Templates** pop-up window opens back up and the selected tag is added and marked. See *Figure 54, Updated IJ Templates Pop-Up Window*.

13) Templa	tes		\times		
	Q Search					
0	Tag 🍦	Tag Title	Last Updated 🝦	Edit		
0	<u>F0553</u>	Right to Participate in Planning Care	01/28/2025, 05:39:13 PM	1		
0	F0559	Choose/Be Notified of Room/Roommate Change	01/28/2025, 05:37:38 PM	1		
0	F0552	Right to be Informed/Make Treatment Decisions	01/28/2025, 05:37:20 PM	1		
0	F0550	Resident Rights/Exercise of Rights	01/10/2025, 12:10:50 PM	1		
0	<u>F0551</u>	Rights Exercised by Representative	11/11/2024, 05:13:12 PM	1		
0	<u>F0610</u>	Investigate/Prevent/Correct Alleged Violation	11/07/2024, 04:19:02 PM	1		
0	<u>F0602</u>	Free from Misappropriation/Exploitation	11/07/2024, 04:16:26 PM	1		
0	<u>F0554</u>	Resident Self-Admin Meds-Clinically Approp	09/18/2024, 06:06:25 PM	1		
	Download Templates 🛨 Cancel Add IJ Template					

Figure 54: Updated IJ Templates Pop-Up Window

11.8 Click **Cancel** or **X** to close the window or **Download Templates**, as desired.

12. Add Residents to Sample List

Purpose: Contains all the residents in a survey.

- Surveyors can manually select residents to include in the sample list
- Only the TC can deselect a resident
- There are system-selected residents automatically included on the list
- The completed list can be downloaded as a PDF
- The system automatically selects any resident:
 - On the **Current Sample Candidates** list, regardless whether that resident is checked or not checked on that page
 - Assigned to a facility task, both manually or from an intake
 - Assigned to an investigation, both manually or from an intake
 - Tagged in any note
- The system automatically deselects any resident:
 - Removed from the Current Sample Candidates list
 - o Unassigned from a facility task, both manually or from an intake
 - Unassigned from an investigation, both manually or from an intake
- All system selected residents (with the exception of those added from Notes) will deselect automatically if the action that added them is undone.
- Residents selected from being tagged in a Note will remain selected if the resident is removed from the Note.
- The TC can manually deselect any resident whether they were manually added or system added.

12.1.1 Click Add Residents to Sample List icon on top right of screen. See *Figure 55, Add Residents to Sample List Icon*. The **Add Residents to Sample List** pop-up window opens. See *Figure 56, Add Residents to Sample List Pop-Up Window*.



Figure 55: Add Residents to Sample List Icon

Add Residents to Sam	×		
Q Search			Download PDF
Resident 💠	BIMS 👙	Room 👙	Admin Date 👙
Dover, Eileen (9)		L-R-L	2024-08-01
KENT, LEAH (2)	13	60787049	2024-05-24
MUELLER, AIMEE (1)	13	60787057	2024-05-24
OWEN, KHADJIA (7)	13	60787045	2024-05-24
PENA, AMY (8)	13	60787046	2024-05-24
PETERSON, ADELE (4)	13	60787061	2024-05-24
SIMMONS, ANA (6)	13	60787044	2024-05-24
STEPHENS, ELSA (3)	13	60787047	2024-05-24
VASQUEZ, BRIANNA (5)	13	60787048	2024-05-24
			Cancel Save

Figure 56: Add Residents to Sample List Pop-Up Window

- 12.1.2 Click the check box to the left of the resident to select any resident.
- 12.1.3 Click **Download PDF**. The list downloads.

13. Offsite Prep

Purpose: To inform and prepare the survey team ahead of entering a recertification survey. It provides historical information from previous surveys and establishes the expected work to be done by the team in the current survey.

Notes:

- The Team Coordinator (TC) of a survey team completes Offsite Prep.
- Complaints and facility-reported incidents (FRI) are collectively referred to as intakes. Review the name of the intake link to see whether the intake is a complaint or an FRI (For example, **Complaint** 1234 vs. **Incident** 1234).
- Only the TC can edit the **Offsite Prep** page. Other survey team members see the page as read only.
- The badge next to Offsite Prep shows the status of the page. In Progress means the TC is still working on the page. Finalized means the page has been completed. See *Figure 57, Offsite Prep Badge.* Information may be edited when a badge says **In Progress**.



Figure 57: Offsite Prep Badge

• Finalized pages are a snapshot of all data that was there when finalized.
13.1 Navigate to Survey Prep

- 13.1.1 Click **Survey Prep** on the left menu. The **Survey Prep** menu opens. See *Figure 58, Offsite Prep* and *Table 8, Offsite Prep Detailed Callout.*
- 13.1.2 Click **Offsite Prep**. The **Offsite Prep** window opens.

Survey 1DF843-H1 Marion Manor NH CCN 015651 Nursing Home	Offsite Prep	a	G	Finalize
SPECIAL FOCUS STATUS Active	Facility Information			
Basic Information Teams	Administrator Doohan, Howie (j)	Previous Recertification Survey Date No information (1)	Last Updated by NHCS_Singy, Pat at 01/08/2025 5:32 PM	
LTCSP Survey Prep	Review Prior to Visit			
Offsite Prep				
Entrance Conference	Repeat Deficiencies		View Provider His	tory Report
Team Meeting		R I U & v Dubik v 12nt v		

Figure 58: Offsite Prep

Table 8: Offsite Prep Detailed Callout

No.	Section Name	Section Detail	Description
			In Progress shows the TC is still updating the page.
а	In Progress/ Finalized	Status of the page	Finalized shows the TC has finalized the Offsite Prep page. Any additional edits switch the status to In Progress. It is necessary to click Finalized to put the page back into a Finalized status.
b	Finalized	Button to select to finalize offsite prep for this survey.	Click to send a system- generated email to each individual in the Team Unit Assignment noting that Offsite Prep has been finalized. Finalize only appears for the TC.

13.2 Facility Information

Review facility information. See *Figure 59, Offsite Prep: Facility Information* and *Table 9, Facility Information Detailed Callout.*

Facility Information		
Administrator a Doohan, Howie (j	Previous Recertification Survey Date b	Last Updated by C NHCS_Singy, Pat at 01/08/2025 5:32 PM

Figure 59: Offsite Prep: Facility Information

Table 9: Facility Information Detailed Callout

No.	Section Detail	Description
а	Administrator	Taken from Provider Details
b	Previous Recertification Survey Date	The exit date of the most recent H1 survey with an exit date.
с	Last Updated by	The date and time of the TC who made the last update.

13.3 Review Prior to Visit

Review this information prior to the survey visit. See *Figure 60, Offsite Prep: Review Prior to Visit* and *Table 10, Review Prior to Visit Detailed Callout.*

(4) 💥	Г	6	ð	в	I	U	* ~	Rubik	~	12pt	~	:=	=	æ	6	(?)
- EA9A (T	rootmo	nt/Sva	s to Dr	ovent	/	-	-	Lileors) cited	2 voare	2021 201	0)		-		0	•
• F993 (T	his othe	er desc	ription	is), cit	ed 3	year	s (184	5, 2312)	z years	2021, 201	7)					
ist Standard	d Surve	ey Res	ults													
	6	6	à	P	т		A	Bubik		12pt	2	:=	:=	:=	-	٩
0 00	.0	,	V.	0		-	-	Rubik		12.01				-	0	V
repositi	e: F686 on one	(Treat of thre	ment/s e samp	Svcs t oled re	o Pre eside	event ents r	t/Heal eview	Pressure Ulco ed for pressur	ers) at a re ulcers	D: Based o This failu	on observ re had the	ation, ir e poten	terv tial f	view ar	id reco resider	rd review the facility failed t nt to develop a pressure ulco
repositi eview of Con	e: F686 on one nplaint	(Treat of thre	ment/S ee samp FRIs si	Svcs t bled re nce P Prior	o Previ Previ	event ents r ious I	t/Heal eview Recer	Pressure Ulc: ed for pressur	ers) at a re ulcers rvey Dat	D: Based o This failu e (06/05,	n observ re had the /2023) Intake S	ation, ir e poten Start Da	terv tial f	view ar	id reco resider	rd review the facility failed t nt to develop a pressure ulco
repositi eview of Con Intake ID \$	e: F686 on one nplaint	s and	ment/See samp FRIs si	Svcs t oled re ince P Prior	o Prezi Previ ity (ious I	//Heal eview Recer	Pressure Ulcred for pressure	ers) at a re ulcers rvey Dat	D: Based (This failu e (06/05,	n observ re had the /2023) Intake S 05/09/2	ation, ir e poten Start Da	terv tial f	view ar	id reco resider	rd review the facility failed t nt to develop a pressure ulco Intake Closed Date 06/08/2023
repositi eview of Com Intake ID ‡ Incident 678 Complaint 72	e: F686 on one nplaint 539 23046	(Treat of thre	ment/See samp	Non-I	o Previ esside Previ ity (event ents r ious I ediate	/Heal eview Recer	Pressure Ulcr ed for pressur tification Sur ardy-Medium ardy-High	ers) at a re ulcers	D: Based (This failu e (06/05,	n observ. re had the /2023) Intake S 05/09/2 06/07/2	ation, ir e poten Start Da 023 023	terv tial f	view ar	id reco resider	Intake Closed Date 06/08/2023

Figure 60: Offsite Prep: Review Prior to Visit

Table 10: Review Prior to V	isit Detailed Callout
-----------------------------	-----------------------

No.	Section Detail	Description
а	Repeat Deficiencies	Documents any repeat deficiencies. Click link to view the Provider History report. The link opens in a new tab.
b	Last Standard Survey Results	Auto populates the results of the last standard survey. Shows applicable tags, tag descriptions, scope and severities, and opening statements from the last standard survey when historical information is available; otherwise, TC may add pertinent information as needed. Click link to generate the prior CMS-2567 for additional information, if desired. The prior CMS-2567 can only be viewed by survey team members who were on the survey for that CMS-2567.
С	Review of Complaints and FRIs since Previous Recertification Survey Date	This is a listing of all intakes that have been set to Closed since the previous survey. This information is dynamic based on the derived Previous Recertification Survey Date in the Facility Information section. Shows all the intake notes associated with that intake. Add any relevant notes in the text field about closed intakes. Click on any intake ID to review the intake.

13.4 Staffing

Notes:

- The **FY Quarter** and **Year** are required fields once a row is selected on the PBJ Staffing Table. The **Staffing Requirements** cannot be finalized unless a quarter and year are selected, or the row is deselected.
- **Staffing Notes** are used to document any additional notes related to the decisions about the PBJ Staffing table.

Fill out staffing requirements. See *Figure 61, Offsite Prep: Staffing* and *Table 11, Staffing Detailed Callout.*

	Concern	FY Quarter *	Year *			
~	Low weekend staffing	2	~ 2023			
	RN coverage for 8 consecutive hours/day	Select	∽ Select			
~	Licensed nurses for 24 hours/day	2	~ 2024			
	1 star staffing rating	Select	∽ Select			
	Failed to submit PBJ data	Select	~ Select			
Staffing Notes	a CNA in the dining room.	✓ 12pt	E 🚍 🖨 🗇			
Are there any	are there any current nurse staffing waivers for this facility?					

Figure 61: Offsite Prep: Staffing

Table 11: Staffing Detailed Callout

No.	Section Detail	Description
а	Does the facility have staffing concerns	If the response to this question is Yes , then the list of staffing concerns is enabled and the PBJ Staffing Detail modal is accessible from other pages. If the response to this question is No , then the list of staffing concerns is not enabled.
b	Mark all concerns	 Select from any combination of the following rows: Low weekend staffing RN coverage for 8 consecutive hours/day License nurses for 24 hours/day 1 star staffing rating Failed to submit PBJ data This option automatically cites the F0851 tag (CE#1) at a severity/scope of F, Max Severity = 2. Deselecting this row undoes the auto-citing as long as nothing has been changed with the F0851 tag in terms of compliance decision or selected level or declaration on potential citations. Note any concerns along with applicable quarter and year. Be sure to fill out both quarter and year in separate fields.
с	Staffing Notes	Document any additional notes related to the decisions about the PBJ Staffing table.
d	Are there any current nurse staffing waivers	The default response is No, and staffing waivers is not editable. Click Yes to add a note about staffing waivers.
е	Note any staffing waivers	This field is editable when the prior question is Yes . It is possible to check variances or waivers and add additional notes.

13.5 Active Intakes

Purpose: To select the LTCSP Areas for specific intakes so that the allegations can be investigated.

Notes:

- This section displays all intakes linked to the survey.
- It is not possible to discharge a resident on the Offsite Prep screen when a Care Area has been selected for the intake.
- The TC can update the **Resident Closed Record** when adding an Intake Closed Record. This discharges the resident.

Review the **Active Intakes** Table. See *Figure 62, Active Intakes Table and Table 12, Active Intakes Detailed Callout*.

Note: The **Active Intakes** section shows the current complaints and incidents for the facility as well as specific information about the resident.

4	Active Int	a + Add New Resident			
6 2	Active Int	akes			
		Intake ID 🛊	d Allegations	e Person(s) Affected	f Resident (ID), Room
g	, F	Incident 1077102	Accidents	Anonymous	Nutt, Hazel (11) , N-8
11	>	<u>Complaint 1078501</u>	Resident/Patient/Client Abuse-Resident to Resident	None	Legge, Peg (12) , F-1

Figure 62: Active Intakes Table

No.	Name	Description
а	+ Add New Resident	Refer to + Add New Resident for details
b	[No] Active Intakes	Shows the number of active intakes in the table.
с	Intake ID	Click the link to open the intake in a new tab in order to read more about it.
d	<u>Allegations</u>	Click the link to open the Allegation Details modal to see all allegation details from the allegation.
e	Person(s) Affected	Shows all Parties Involved from the intake whose involvement is Person Affected (including Anonymous Party).
f	Resident (ID), Room	Shows the resident name, ID and room number. There may be more than one resident shown.
g	Intake Details	Click caret to open details on active intakes.

Intake Notes

a. Click the intake ID to view the **Intake Notes**. The **Intake Notes** pop-up window opens. See *Figure 63, Intake Notes Pop-Up Window.*

Active Intakes				+ Add New Resident
2 Active Intakes	Allegations		Person(s) Affected	Resident (ID), Room
> Incident 10	177102 Accidents		Anonymous	Nutt, Hazel (11) , N-8
> <u>Complaint</u>	1078501 Resident/Patient/Client	Abuse-Resident to Resident	None	Legge, Peg (12) , F-1
Additional Notes	Intake Notes	Click to open intake.	×	
	View Incident 1077102	Intake opens in new tab.		
Was abuse cited on the pri	None			Yes No
Note any federal waivers/			Close	
© ¥ ⊡ ∿				

Figure 63: Intake Notes Pop-Up Window

b. Click View [Complaint/Incident Intake ID] to view the complaint. The complaint opens in a different tab to the [Complaint/Incident] Basic Information page. Select original tab to get back to the Offsite Prep page or close the intake tab.

Allegation Details

a. Click the link under **Allegations** to view the allegation details about the intake. See *Figure 64, Allegation Details.*

Active Intakes				+ Add New Resident
2 Active Intakes	_			
Intake ID 🍦	AI	legations	Person(s) Affected	Resident (ID), Room
> Incident 10	77102 <u>A</u> d	cidents	Anonymous	Nutt, Hazel (11) , N-8
> <u>Complaint</u>	1078501 <u>Re</u>	sident/Patient/Client Abuse-Resident to Resident	None	Legge, Peg (12) , F-1
Additional Notes Was abuse cited on the print Note any federal waivers/	Allegation De View Accidents	tails Click to open allegation. Allegation opens in new ta anana peel on purpose	ab.	Yes No

Figure 64: Allegation Details

b. Click **View [Allegation]** to view the allegation details. The allegation details open in a different tab to the **Allegation** page. Select original tab to get back to the **Offsite Prep** page or close the **Allegation** tab.

Intake Details

Click the caret next to the intake to view intake details. See *Figure 65, Intake Details*.

~	Acci	<u>dents</u>		Anonymous		Nutt, Hazel (11) , N-8		
Resident (ID), Room	Care Areas	Investigations	Facility Tasks	Intake Closed Records	D/C Location	Offsite	in Pool	
Nutt, Hazel (🗸	Food Hospitalizations Falls	Accidents Food	Dining Observation	None	Planned Discharge		Discharged	<u>Edit</u>
+ Add Another Resident								

Figure 65: Intake Details

Notes:

- The Care Areas, Investigations, Facility Tasks, and Intake Closed Records are tied to the intake, not the resident. The <u>Resident Closed Record</u> is tied to the resident.
- In Pool and Offsite are tied to the resident.

Resident (ID), Room

Shows the resident name, ID and room number. There may be more than one resident shown.

- a. Click the caret next to the resident to switch residents.
- b. Click Add Another Resident to add another resident to the intake.

Care Areas

Lists the care areas associated with the intake.

Investigations

Lists the investigations associated with the intake.

Facility Tasks

Lists the facility tasks associated with the intake.

Intake Closed Records

Lists any intake closed records.

D/C Location

Discharge location

Offsite

The **Offsite** badge shows in this field when the selected resident is an Offsiteselected resident.

In Pool

- **In Pool** is checked when the resident is part of the Initial Pool.
- IP is unchecked when the resident is either a No, Unknown, or Maybe (N, U, M).
- A **Discharged** badge is shown when the resident is discharged and the checkbox is removed.

+ Add Another Resident

a. Click **Add Another Resident** to add an additional resident to the intake. A new line opens under the existing resident on the intake. See *Figure 66, Add Another Resident.*

	Resident (ID), Room		Care Areas	Investigations	Facility Tasks	Intake Closed Records	D/C Location	Offsite	in Pool	
	Nutt, Hazel (ıtt, Hazel (🗸		Accidents Dining Observation None Food		None	Planned Discharge		Discharged	Edit
	Select	/	None	None	None	None	None			â
+	Add Another Residen	t								

Figure 66: Add Another Resident

b. Select resident from drop-down menu of existing residents. See *Figure 67, Select Resident.*

Resident (ID), Room	Care Areas	Investigations	Facility Tasks	Intake Closed Records	D/C Location	Offsite	in Pool	
Nutt, Hazel (~	Food Hospitalizations Falls	Accidents Food	Dining Observation	None	Planned Discharge		Discharged	Edit
Clyde, Bonni 🗸	None	None	None	None	None		~	Edit
+ Add Another Resident			You must select	at least one LTCSP Area base	ed on the Intake/Allega	tion. Refer to t	the LTCSP PG for ir	nstructions.

Figure 67: Select Resident

Note: Review notification. The intake must be updated. Click **Edit** to update the resident information. See details on how to edit below.

Edit

Click **Edit** to edit LTCSP Areas. The **Identify LTCSP Areas** pop-up window opens. See *Figure 68, Identify LTCSP Areas Pop-Up Window* and *Table 13, Identify LTCSP Areas Pop-Up Window Detailed Callout.*

Note: Click **Save** to save any updates. It is necessary to scroll to the bottom of the window to see the **Save** button.

	Identify LTCSP Areas		×
a	Intake ID Incident 1077102	Resident (ID), Roo Nutt, Hazel (11), N-4	m B
G	Care Areas ()		* indicates required field
	Food X Hospitalizations	X Falls X Select all that apply	× ~
e	Investigations (i)		
	Food a Accidents X S	select all that apply	× ~
	Assigned Surveyor		
Û	NHCS_Singy	~	g
D	Facility Tasks (j)		
	Dining Observation X Select	ct all that apply	× ~
0	Intake Closed Records (j)		
	Select all that apply		~
Ð	D/C Location (j)		
	Planned Discharge		~
k	Description		
			Cancel Save

Figure 68: Identify LTCSP Areas Pop-Up Window

Table 13: Identify LTCS	P Areas Pop-Up	Window Detailed	Callout
-------------------------	----------------	-----------------	---------

No.	Name	Description
а	Intake ID	The complaint or incident ID.
b	Resident (ID) <i>,</i> Room	The resident name, ID and room number.
c	Care Areas	Select a care area to force In Pool = Y . This applies to all intakes with which the resident is associated. Select a care area to set the IP Surveyor to the TC on Resident Manager, if one has not already been determined. Discharged residents cannot have care areas selected.
d	Information Button	Hover over the information button for details on how to edit/update each area.
e	Investigations	Select an Investigation to assign the Investigation to the selected resident with the required assigned surveyor. The <u>Investigations</u> page shows all assigned surveyors when they are different, as long as the same investigation is selected for multiple intakes that have the same resident.
f	Assigned Surveyor	Only one surveyor can be assigned. A different surveyor from the survey team can be selected from the drop-down menu.
g	Scroll Bar	 The pop-up window shows a portion of the editable areas. Scroll to view all areas. Note: The figure above shows the entirety of the editable areas for clarity only. It is necessary to scroll to view all editable areas and to save the updates.

No.	Name	Description
h	Facility Tasks	Select a facility task to trigger the task on the Facility Tasks page, if it is not already listed.
i	Intake Closed Records	Select All , Expired , Hospitalized , Unplanned Discharge , or Planned Discharge from the drop- down menu to show why the intake must be investigated.
		Note: The Intake Closed Record is not the same as the Resident Closed Record.
		Discharge location cannot be updated when resident:
j	D/C Location	 Has care areas on an intake Is in the IP (must uncheck) Is Facility, Facility Sample has been finalized
k	Description	Add details about discharge location here.
Ι	Cancel/Save	Cancel to cancel out of edit. Save to save updates.

13.6 Additional Notes

Note: The TC can note the following:

- Whether there was abuse cited on the prior survey or whether there are any abuse allegations or citations for complaints.
- Any federal waivers or variances for onsite review.
- Any active enforcement cases that should not be investigated in this survey.

Add any additional notes. See Figure 69, Offsite Prep: Additional Notes

b								h					No				laint.	2		
sabu	ISE CI	ed on	the p	rior st	andaro	1 sur	rvey o	or ha	veti	here been any	/ abu	se allega	tions or ci	tatior	is fo	r comp	laint	\$7	Yes	3
te an	y fede	eral wa	ivers,	/varia	nces f	or or	nsite	revi	ew											
Э	ж	D	6	ð	в	I	Ū	<u>^</u>	~	Rubik	~	12pt	~	∷≘	Ξ	细	6	0		
te an	y acti	ve enf	orcen	nent c	ases (ı	esid	lent/	issu	es/d	ates/reason)) that	t shouldn	't be inves	stigate	ed					
Ъ	ж	D	6	ð	в	I	Ū	<u>*</u>	~	Rubik	~	12pt	~	i≡	Ξ	≆≡	6	0		
<u> </u>																				

Figure 69: Offsite Prep: Additional Notes

13.7 Ombudsman

Purpose: To track any additional areas of concern the TC may have.

Fill out ombudsman information and note areas of concern, if any. See Figure 70, Offsite Prep: Ombudsman.

Ombudsman		
Ombudsman Name	Contact Date	Phone Number
Addie Minstra	1 01/08/2025	(800) 588-2300
	MM/DD/YYYY	
Areas of Concern		
© ፠፲ ጛ ๙ B I ⊻ Z	✓ Rubik ✓ 12pt ✓ Ξ Ξ	注 👩 🕐
Review abuse concerns		
		h

Figure 70: Offsite Prep: Ombudsman

13.8 Team Unit Assignments

Fill out team unit assignments. See Figure 71, Offsite Prep: Team Unit Assignments and Table 14, Team Unit Assignments Detailed Callout.

Team U	nit Assigr	ments																	
a cmsgu	_jgreen, Pa	at NHC	S_Singy	, Pat	NH.	_CMSGU	_Singy, Pat	N	H_Sing	y_Con	tract.	_Surv	veyo	r, Pat	sur	veyor_roberts_	alabama, P	at (91824)
٩	× D	5	»В	I	Ų,	<u>*</u> ~	Rubik	~	12pt		\sim	∷≘	Ξ	細	8	0			
b																			
																			- 11

Figure 71: Offsite Prep: Team Unit Assignments

 Table 14: Team Unit Assignments Detailed Callout

No.	Description
а	Lists all survey team members
b	Type survey team members and assignments.

13.9 Finalize Offsite Prep

Note: Finalized is enabled for the TC when all required fields are completed.

13.9.1 Click **Finalize** in the top right to finalize Offsite Prep. The **Finalized** badge shows next to the **Offsite Prep** title. See *Figure 72, Finalize Offsite Prep Badge.*



Figure 72: Finalized Offsite Prep Badge

- Note: Once Offsite Prep has a Finalized status, any additional updates to the Offsite Prep page return the page back to In Progress.
- 13.9.2 An email is automatically sent to each survey team member listed in the **Team Unit Assignments** section each time Offsite Prep is finalized.
 - **Note**: If Offsite Prep is finalized more than one time, more than one email is sent.

14. Entrance Conference

- **Purpose**: To obtain the information needed from the facility immediately upon entrance.
- **14.1** Click **Entrance Conference** on the left menu. See *Figure 73, Entrance Conference*. The **Entrance Conference** window opens.

=	Home / Waters Edge Nursing Home / Survey 1703D6-H1				
Survey 1703D6-H1 Waters Edge Nursing Home	Entrance Conference				
Nursing Home	Information Needed From The Facility Immediately Upon Entrance				
Basic Information					
Teams	Entrance Conference Date and Time © No information				
LTCSP Survey Prep	Census number				
Offsite Prep	Complete matrix for new admissions in the last 30 days who are still residing in the facility.				
Entrance Conference	An alphabetical list of all residents (note any resident out of the facility).				
Team Meeting	A list of residents who smoke, designated smoking times, and locations.				
Investigation					
Resources 🕁	Entrance Conference				
Citations	Conduct a brief Entrance Conference with the Administrator. Ask the Administrator to make the Medical Director aware that the survey				
Statement of Deficiencies	team is conducting a survey. Offer an opportunity to the Medical Director to provide feedback to the survey team during the survey period if needed.				
0 CMS-670					
) CMS-671	Information regarding full time DON coverage (verbal confirmation is acceptable).				
Notes	Information about the facility's emergency water source (verbal confirmation is acceptable).				
Attachments	Signs announcing the survey that are posted in high-visibility areas.				

Figure 73: Entrance Conference

Notes:

- Only the TC can edit the Entrance Conference section.
- Each Entrance Conference section is separated by time.
- Click **Edit** to edit or update Entrance Conference date and time. There is no save button; information updates immediately.
- Date and time can be future dated.
- The date and time stamp indicate the time that the information must be completed.
- Certain boxes, when checked, require attachments. See <u>Attachments</u>, to review how to upload an attachment.

14.2 Complete the following information immediately upon entrance. See *Figure 74, Entrance Conference: Information Needed Immediately Upon Entrance.*

Information Needed From The Facility Immediately Upon Entrance			
© 06/11/2024 6:01 PM ✓ Edit			
Census number			
Complete matrix for new admissions in the last 30 days who are still residing in the facility.			
An alphabetical list of all residents (note any resident out of the facility).			
A list of residents who smoke, designated smoking times, and locations.			
Entrance Conference			
Conduct a brief Entrance Conference with the Administrator. Ask the Administrator to make the Medical Director aware that the survey team is conducting a survey. Offer an opportunity to the Medical Director to provide feedback to the survey team during the survey period if needed.			
Information regarding full time DON coverage (verbal confirmation is acceptable).			
Information about the facility's emergency water source (verbal confirmation is acceptable).			
Signs announcing the survey that are posted in high-visibility areas.			
A copy of an updated facility floor plan, if changes have been made, including COVID-19 observation and COVID-19 units.			
Name of Resident Council President.			
Provide the facility with a copy of the CASPER 3. See note			
Does the facility offer arbitration agreements? If so, please provide a sample copy.			
Has the facility asked any residents or their representatives to enter into a binding arbitration agreement?			
Name of the staff responsible for the binding arbitration agreements			

Figure 74: Entrance Conference: Information Needed Immediately Upon Entrance

14.3 Complete the following information within one hour of entrance. See *Figure 75, Entrance Conference: Information Needed Within One Hour of Entrance.*

Information Needed From Facility Within One Hour Of Entrance	⊙ 06/11/2024 7:01 PM		
Schedule of meal times, locations of dining rooms, copies of all current menus including therapeutic menus that will be served for the duration of the survey and the policy for food brought in from visitors.			
Schedule of Medication Administration times.			
Number and location of med storage rooms and med carts.			
The actual working schedules for all staff, separated by departments.			
List of key personnel, location, and phone numbers including the Medica	l Director and contract staff (e.g., rehab services).		
 If the facility employs paid feeding assistants, provide the following infor a) Whether the paid feeding assistant training was provided through a minimum of 8 hours of training; b) A list of staff (including agency staff) who have successfully compresidents with eating meals and/or snacks; c) A list of residents who are eligible for assistance and who are current of the source of	rmation: a State-approved training program by qualified professionals as defined by State law, with pleted training for paid feeding assistants, and who are currently assisting selected ently receiving assistance from paid feeding assistants.		
Name of the facility's infection preventionist (IP). Documentation of the infection prevention and control.	IP's primary professional training and evidence of completion of specialized training in		

Figure 75: Entrance Conference: Information Needed Within one hour of entrance

14.4 Complete the following information within four hours of entrance. See *Figure 76, Entrance Conference: Information Needed Within Four Hours of Entrance.*

Information Needed From Facility Within Four Hours Of Entrance
Complete the matrix for all other residents. The TC confirms the matrix was completed accurately.
Admission packet.
Dialysis Contract(s), Agreement(s), Arrangement(s), and Policy and Procedures, if applicable.
List of qualified staff providing hemodialysis or assistance for peritoneal dialysis treatments, if applicable.
Agreement(s) or Policies and Procedures for transport to and from dialysis treatments, if applicable.
Does the facility have an onsite separately certified ESRD unit?
Hospice Agreement, and Policies and Procedures for each hospice used (name of facility designee(s) who coordinate(s) services with hospice providers).
 Infection Prevention and Control Program Standards, Policies and Procedures, including: a) the surveillance plan; b) Antibiotic Stewardship program; and c) Influenza, Pneumococcal, and COVID-19 Immunization Policy & Procedures.
QAA committee information (name of contact, names of members and frequency of meetings).
QAPI Plan.
Abuse Prohibition Policy and Procedures.
Description of any experimental research occurring in the facility.
Facility assessment.
Nurse staffing waivers.
List of rooms meeting any one of the following conditions that require a variance: •Less than the required square footage •More than four residents

Figure 76: Entrance Conference: Information Needed Within Four Hours of Entrance

14.5 Complete the following information by the End of the First Day of Survey, Within 24 hours of Entrance, and Additional Questions. See *Figure 77, Entrance Conference: Remaining Information Needed*.

Note: The arbitration question is not selected by default. Select **Yes** to trigger the Arbitration Facility Task.

Γ	Information Needed By The End Of The First Day Of Survey ③ 06/11/2024			
	Provide each surveyor with access to all resident electronic health records - do not exclude any information that should be a part of the resident's medical record. Provide specific information on how surveyors can access the EHRs outside of the conference room. Please complete the attached form on page 4 which is titled "Electronic Health Record Information."			
	Provide a list of residents, who are currently residing in the facility, that have entered into a binding arbitration agreement on or after 9/16/2019. Provide a list of residents who resolved disputes through arbitration on or after 9/16/2019.			
	Information Needed From Facility Within 24 Hours Of Entrance			
	Completed Medicare/Medicaid Application (CMS-671). Please complete the attached form on page 3 which is titled "Beneficiary Notice - Residents Discharged Within the Last Six Months".			
	Additional Questions			
	Has the facility asked a resident or his/her representative to enter into a binding arbitration agreement? Ves No This field is required			

Figure 77: Entrance Conference: Remaining Information Needed

15. Team Meeting

Purpose: A communication tool that allows the entire team to review areas of concern and check the status of the assigned work.

Notes:

- All members of the survey team have access.
- The TC has the ability to edit. Other team members have view only access.
- TC notes are not seen in real time. The screen must be refreshed to view notes.
- The Top icon appears only when at the end of the questions. Click **Top** to go to the top of either tab on the Team Meeting page. See *Figure 78, Top Icon*.



Figure 78: Top Icon

• There are two tabs in **Team Meeting**: <u>Initial Pool</u> and <u>Investigation</u>.

Click **Team Meeting** on the left menu under **Survey Prep**. The **Team Meeting** window opens with **Initial Pool** and **Investigation tabs**. See *Figure 79, Team Meeting*.

Survey 1DF843-H1 Marion Manor NH CCN 015651 Nursing Home SPECIAL FOCUS STATUS Active	Team Meeting	Investigation			
	Were any offsite selected res	idents discharged?			
Basic Information	Resident 💠		BIMS 🖕	Room ≑	Admission Date 🝦
Teams	PETERSON, ADELE (4)		13	60787061	05/24/2024
LTCSP					
Survey Prep ^					
Offsite Prep					
Entrance Conference	Ensure all offsite selected re	sidents were included ir	n the initial pool, unless o	lischarged	
Team Meeting	Resident 👙		BIMS ÷	Room 🛓	Admission Date 👙
Initial Pool 🗸	STEPHENS, ELSA (3)		13	60787047	05/24/2024
Investigation ~	VASQUEZ, BRIANNA (5)		13	60787048	05/24/2024
Resources 🕁					

Figure 79: Team Meeting

15.1 Initial Pool

Purpose: To view residents in the initial pool and verify that the residents have been screened for the survey.

Notes:

- Initial Pool tasks focus on Day 1 tasks.
- Surveyors can use the Initial Pool area in <u>Resident Manager</u> to access the Interview, Observation, and Record Review screens to document comments and enter responses for care areas for each resident.
- The majority of the information in Initial Pool is pre-populated. Only the TC can update the page.
- All columns can be sorted. Click the caret next to the column header.

Click the **Initial Pool** tab to view **Initial Pool** information. See *Figure 80, Initial Pool Information, part 1 of 5, Figure 81, Initial Pool Information, part 2 of 5, Figure 82, Initial Pool Information, part 3 of 5, Figure 83, Initial Pool Information, part 4 of 5,* and *Figure 84, Initial Pool Information, Part 5 of 5.*

Notes:

- See *Figure 85, PBJ Staffing Details Concerns* and *Figure 86, PBJ Staffing Details Notes* for more information on PBJ details from Offsite Prep.
- The PBJ link only shows when the question Does the facility have staffing concerns based on the CASPER PBJ Staffing Data Report under Staffing on the Offsite Prep page answered Yes.

Team Meeting	I				
Initial Pool	Investigation				
Were any offsite selected re	esidents discharged?				
Resident 💠		BIMS ÷	Room 🛓	Admission Date 🝦	
PETERSON, ADELE (4)		13	60787061	05/24/2024	
Ensure all offsite selected r	residents were included ir	n the initial pool, unless o	lischarged		
Resident 🖕		BIMS ¢	Room 🖕	Admission Date 👙	
STEPHENS, ELSA (3)		13	60787047	05/24/2024	
VASQUEZ, BRIANNA (5)		13	60787048	05/24/2024	
Was at least one resident who smokes included in the initial pool?					
Resident ≑		BIMS ÷	Room 🛓	Admission Date 🝦	
Clyde, Bonnie-Ann (14)			BC-12	10/01/2024	

Figure 80: Initial Pool Information, part 1 of 5

Enter the total number of new admits.			
7			
Go over each newly admitted resident listed on the	matrix and ensure eac	h resident listed was s	creened by a team member.
Resident 💠	Surveyors 🛓		
Booke, Rita (15)	 NHCS_Singy 		
Clyde, Bonnie-Ann (14)	surveyor_robNHCS_Singycmsgu_jgree	erts_alabama (91824) n	
Dover, Eileen (9)	surveyor_robNHCS_Singy	erts_alabama (91824)	
Legge, Peg (12)	surveyor_robNHCS_Singy	erts_alabama (91824)	
Nutt, Hazel (11)	NH_CMSGU_NHCS_Singy	Singy	
Spencer, Candace (13)	 NHCS_Singy 		
Yasoon, C (10)	 NHCS_Singy 		
Are there any residents with current abuse concer	ns?		
Resident 🛊	BIMS ÷	Room 🖕	Admission Date 🝦
Clyde, Bonnie-Ann (14)		BC-12	10/01/2024
KENT, LEAH (2)	13	60787049	05/24/2024
Legge, Peg (12)		F-1	07/17/2024

Figure 81: Initial Pool Information, part 2 of 5

Ensure any resident on the matrix who has a unique significant concern with a facility acquired pressure ulcer as noted on the matrix. The reside	vas included in the initial pool. For example, there is only one reside nt should be included in the initial pool.	nt
Add Isabelle Ringing to the IP		
Discuss any discrepancy found with the matrix.		
How many residents did each surveyor include in the initial pool?		
Surveyor 🛊	Resident(s) 🔶	
cmsgu_jgreen	MUELLER, AIMEE (1)	
NHCS_Singy	 KENT, LEAH (2) Dover, Eileen (9) Yasoon, C (10) Spencer, Candace (13) Clyde, Bonnie-Ann (14) 	
NHCS_Singy Surveyor Unassigned	 KENT, LEAH (2) Dover, Eileen (9) Yasoon, C (10) Spencer, Candace (13) Clyde, Bonnie-Ann (14) STEPHENS, ELSA (3) VASQUEZ, BRIANNA (5) 	
NHCS_Singy Surveyor Unassigned surveyor_roberts_alabama (91824)	 KENT, LEAH (2) Dover, Eileen (9) Yasoon, C (10) Spencer, Candace (13) Clyde, Bonnie-Ann (14) STEPHENS, ELSA (3) VASQUEZ, BRIANNA (5) Legge, Peg (12) 	

Figure 82: Initial Pool Information, part 3 of 5

How much work does each surveyor have left to do?					
Surveyor 🔶	Resident(s) 🖕	Task			
cmsgu_jgreen	MUELLER, AIMEE (1)	Unfinished RRI, RI, RR, RO			
NHCS_Singy	 KENT, LEAH (2) Yasoon, C (10) Spencer, Candace (13) Clyde, Bonnie-Ann (14) 	 Unfinished RR, RO Unfinished RRI, RI, RR, RO Unfinished RR, RO Unfinished RO 			
Surveyor Unassigned	 STEPHENS, ELSA (3) VASQUEZ, BRIANNA (5) 	Unfinished RRI, RI, RR, RO Unfinished RRI, RI, RR, RO			
surveyor_roberts_alabama (91824)	Legge, Peg (12)	Unfinished RRI, RR, RO			
What is the status and pertinent information for complaint and FRI residents?					
Any harm, SQC or IJ concerns (other concerns will be discussed during the sample meeting)?					
Surveyor 🗧		Resident(s) $\frac{1}{2}$			
surveyor_roberts_alabama (91824)		Legge, Peg (12)			

Figure 83: Initial Pool Information, part 4 of 5

What is the status and pertinent information for complai	int and FRI residents?		
			11
Any harm, SQC or IJ concerns (other concerns will be dis	cussed during the sample meeting)?		
Surveyor 🛊		Resident(s) 🗄	
surveyor_roberts_alabama (91824)		Legge, Peg (12)	
How many resident representative/family interviews we	re completed?		
Surveyor 🛊	Resident(s) 🖕		
NHCS_Singy	Spencer, Candace (13)		
Review the list of initial pool concerns and ensure the tea	am discusses potential staffing concern	i.	
Abuse			
Accident Hazards			
Activities Advance Directives			
Choices Display			
Food			
 Infections (not UTI, PU or Respiratory) Mood/Behavior 			
Nutrition			
 Personal Property Smoking 			↑ Тор

Figure 84: Initial Pool Information, Part 5 of 5

PBJ Staffing Details ×			
Concerns	Notes		
Concern	FY Quarter	Year	
Low weekend staffing	2	2023	
Licensed nurses for 24 hours/day	2	2024	
		Close	

Figure 85: PBJ Staffing Details Concerns

PBJ Staffing Details	×			
Concerns	Notes			
Staffing Notes Could not find a CNA in the dining room.				
Note any staffing variances/waivers				
A waiver exists for 3 CNAs instead of 4 for a period of 5 hours every Sunday, from 2AM to 7AM because the nursing home is located in a rural area.				
	Close			

Figure 86: PBJ Staffing Details Notes

15.2 Investigation

- **Purpose**: Investigation focuses on facility tasks, finalize sample, investigations and potential citations.
- Note: Only active Facility Tasks, Investigations, or Potential Citations are shown. Once a task is complete, it no longer shows on the page.

Click the **Investigation** tab to view Investigations. See *Figure 87, Investigation Information, page 1 of 3, Figure 88, Investigation Information, page 2 of 3,* and *Figure 89, Investigation Information, page 3 of 3.*

Notes:

- The PBJ link only shows when the question **Does the facility have staffing concerns based on the CASPER PBJ Staffing Data Report** under **Staffing** on the <u>Offsite Prep</u> page answered **Yes.**
- Answer Yes to the last question, Are there concern(s) regarding unethical, criminal, civil or administrative violations of the Social Security Act by the facility? to trigger the F895 Compliance and Ethics for the Facility. See *Figure 90, Initiate F895.*

Initiate F895	×
Initiate F895 Compliance and Ethics for the Facility. Refer to the regulations and interpretive guidance to investigate the concern.	
Close	

Figure 87: Initiate F895

Team Meeting					
Initial Pool	Investigation				
Are there newly identified ha	irm or IJ concerns?				
Surveyor 🖕		Resident(s) 🗦			
NHCS_Singy		 Legge, Peg (12) Clyde, Bonnie-Ann (14) 			
Does the sample need to be e	Does the sample need to be expanded to rule out SQC?				
What is the status and pertinent information for complaint and FRI residents?					
What pertinent findings does each surveyor have (ensure you review and address all prior reported concerns)?					

Figure 88: Investigation Information, page 1 of 3

How much work does each surveyor have left to complete?					
Surveyor 🔶	Resident(s) 🖕	Investigation			
NH_Singy_Contract_Surveyor	Clyde, Bonnie-Ann (14)Dover, Eileen (9)	Physical RestraintsActivities			
NHCS_Singy	 Clyde, Bonnie-Ann (14) Dover, Eileen (9) Booke, Rita (15) Yasoon, C (10) Legge, Peg (12) Nutt, Hazel (11) 	 Physical Restraints, Accidents Activities, Advance Directives Care Planning Care Planning, Activities of Daily Living Abuse, Abuse Food 			
Surveyor Unassigned	Nutt, Hazel (11)	Accidents, Accidents			
FACILITY TASKS Arbitration Beneficiary Notification Dining Observation Infection Control Kitchen Medication Administration Medication Storage and Labeling QAPI and QAA Resident Council Sufficient and Competent Nurse Staffing					
Do you need to adjust the workload? Not at this time.					

Figure 89: Investigation Information, page 2 of 3
Have at least three representation	ve interviews been completed?
Surveyor 👙	Resident(s) 🖕
NHCS_Singy	Spencer, Candace (13)
Are there concerns that are indi	ative of a system failure? Do you have enough information to validate that?
Review the list of investigation of investigation of investigation of the second seco	oncerns and ensure the team is discussing potential staffing concerns.
Are there concern(s) regarding u	nethical, criminal, civil or administrative violations of the Social Security Act by the facility?

Figure 90: Investigation Information, page 3 of 3

16. Resident Manager

Purpose: Displays all the residents in the facility.

Notes:

- Residents with MDS indicators are displayed five business days from the survey **Start Date** when there is MDS data.
- Residents may be system-selected to be included in the initial pool during the survey and automatically have an IP status of Yes (Y) and an Offsite badge, which is displayed below the resident's name.
- If there are no residents available or it is more than 5 business days prior to the survey **Start Date**, a message is displayed in place of the resident list. See *Figure 91, No Residents Found* and *Figure 92, Residents Will Be Available 5 Business Days Prior to Survey Start Date.*





Residents will be available 5 business days prior to the Survey Start Date.

Figure 92: Residents Will Be Available 5 Business Days Prior to Survey Start Date

- Residents can be added by surveyors when there is no MDS data for the facility.
- All columns with carets can be sorted. Click on the column name to sort.
- See <u>MDS Information</u> for detailed information on viewing MDS assessment information.

16.1 Resident Manager Overview

Click **Resident Manager** on the drop-down left menu under **Initial Pool**. The **Resident Manager** window opens with **All Residents** and **My Residents** tabs. See *Figure 93, Resident Manager* and *Table 15, Resident Manager Detailed Callouts.*

Survey 1DF843-H1 Marion Manor NH CCN 015651 Nursing Home SPECIAL FOCUS	Resident Manager
STATUS Active	€ f Q. Search Residents Hide Completed Residents
Basic Information Teams	IP Resident : Room : MDS Indicators III RO RR Admit Date : Surveyor
LTCSP	Books, Ria (15) B-52 - - - 10/01/2024 NHCS_Singy (P) Actions -
Initial Pool	Image and the state of the state o
Resident Manager Closed Record Sample	V Investigate New Admission L-R-L O O O(070/2024) NHCS_Singy(P). surveyor_roborts ~ Actions * Image: New Admission 40787049 Dialvsis, Hospice, Trach (+3 more) 15 - - 05/24/2024 NHCS_Singy(P). surveyor_roborts ~ Actions *
Finalize Sample	Impost part offsite Legge Per (12)
Assignments	Image:
Facility Tasks	V Offsite 60787057 Dialysis, Hospics, Trach (±3 more) 13 - - - 05/24/2024 emagu_jgreen (P) × Actions * W OWEN, KHADJIA (7) 60787057 Dialysis, Hospics, No PASARR II w/Dx 13 - - 05/24/2024 emagu_jgreen (P) × Actions *
Potential Citations	Discharged Officities (±4 more) IS -

Figure 93: Resident Manager

Table 15: Resident Manager L	Detailed Callout
------------------------------	------------------

No.	Section Detail	Description
а	Resident Summary	 Displays: The count of Initial Pool residents for the logged in surveyor. The count of Initial Pool residents for all surveyors on the team. The count of residents with a Complaint and/or FRI intake badge.
b	Add New Resident	Add a new admission resident to the list. See <u>Add a</u> <u>New Resident</u> .
с	All Residents	This is the default page and shows all residents in the facility

No.	Section Detail	Description					
d	My Residents	Click this tab to see the surveyor's residents. The residents are shown when the surveyor is both primary and nonprimary.					
е	Search Residents	Search residents in list by name, room number, resident ID					
f	Hide Completed Resident	Hide all residents who are completed (check marks in RI, RO, RR columns)					
g	Filter By	All, All Current Sample Residents, Complaint, Discharged, FRI, New Admission, Offsite Selected					
h	Checkboxes	Checkboxes are to bulk assign surveyors.					
i	IP (Initial Pool)	 Offsite Badge Y Yes. Default setting. Resident was included in the Initial Pool. N No. Resident was not included in the Initial Pool. To change a response to no: Select the Closed Record Reason, which marks the resident as discharged from the facility and changes the initial pool value to N. No Offsite Badge U Unknown. Default setting. Resident will not be included in the Initial Pool. N No. Resident will not be included in Initial Pool. M Maybe. Resident will not be included in Initial Pool. Y Yes. Resident will be included in Initial Pool. 					
j	Resident	Name of the resident and their ID.					
k	Room	Resident's Room Number					
I	MDS Indicators	Related MDS indicators, if applicable, for residents in a recertification survey. Can also be used for initial certification surveys.					

No.	Section Detail	Description						
m	BIMS	The Brief Intervie	The Brief Interview for Mental Status score					
n	RI	Completion statu	Completion status in initial pool for interview					
ο	RO	Completion status in initial pool for observation						
р	RR	Completion status in initial pool for record review						
q	Admit Date	The date the resi	dent was admitted					
r	Surveyor	Surveyor or Surveyors assigned to the resident. A (P) indicates the Primary Surveyor. See <u>Multiple</u> <u>Surveyors</u> .						
S	Action	Drop-down menu with two selections: Update Resident or Discharge Resident . See <u>Update a</u> <u>Resident</u> and <u>Discharge a Resident</u> for further details.						
t	Blue Badges	The blue badges further informati Offsite Discharged Complaint FRI Investigate	under the resident's name give on about the resident: The resident was system-selected as part of the offsite sample. The resident has left the facility. The resident is associated with a complaint intake in Offsite Prep or is linked to a complaint that will be investigated on the survey. The resident is associated with an incident intake in Offsite Prep or is linked to an incident that will be investigated on the survey. The resident is linked to an intake with Initial Pool Care Areas, has been marked FI for a Care Area(s), and/or has been marked for Harm/Immediate Jeopardy.					
		New Admission	The Resident is a new admission.					

16.2 Add a New Resident

16.2.1 Click Add New Resident. See Figure 94, Add New Resident. The Add New Resident pop-up window opens. See Figure 95, Add New Resident Pop-Up Window.



Figure 94: Add New Resident

Add New Resi	ident		×
			indicates required field
First Name *		мі	Last Name *
Room	Admit Date		
	MM/DD)/YYY)	(
	MM/DD/YYYY		
Surveyor			Resident in Initial Pool?
lenna.schott		~	Unknown ~
Add Another Res	sident After Save		Cancel Save

Figure 95: Add New Resident Pop-Up Window

- 16.2.2 Fill out the required information.
- 16.2.3 Click the checkbox **Add Another Resident After Save** to add multiple new admission residents, and the window remains open until all residents have been added.

16.3 Update a Resident

Notes:

Surveyors can:

- Update the name, room number, admit date, initial pool value, and surveyor
- Select the intake type checkbox when a resident is associated with a complaint or FRI that will be investigated with the survey when it does not display in Offsite Prep. The intake badge is then added to the resident in the resident list.
 - 16.3.1 Click Update Resident under the Actions menu next to the resident to be updated. See Figure 96, Update Resident. The Update Resident pop-up window opens. See Figure 97, Update Resident Pop-Up Window.

05/24/2024	NH_Singy_Contract_Surveyor	P)	~	1	Actions -
		Þ	Upd	ate	Resident
			Disc	har	ge Resident

Figure 96: Update Resident

Adams, Jane L.	(29)		×
First Name *			* indicates required field
FIRST Name		mi	
Jane		L	Adams
Room	Admit Date		
105	10/04/	2023	
	MM/DD/YYYY		
Surveyors		Res	ident in Initial Pool?
lenna.schott (P), CSC	Dzias (98054), csmg	lu∼	Maybe 🗸
Subgroup			
Complaint			FRI
Completed			
 Interview 	- Obs	ervation	 Record Review
Delete Resident			Cancel Save

Figure 97: Update Resident Pop-Up Window

- 16.3.2 Fill out the required information.
- 16.3.3 Click **Save**.

16.4 Delete a Resident

Notes:

- New admission residents can be deleted if they do not have associated data.
- **Delete Resident** is not shown on the **Update Resident** window when it is not possible to delete a resident.
- **Delete** is not displayed for MDS residents.
 - 16.4.1 Click Update Resident under the Actions menu next to the resident to be updated. See *Figure 98, Update Resident*. The Update Resident pop-up window opens. See *Figure 99, Update Resident Pop-Up Window*.

		_		
05/24/2024	NH_Singy_Contract_Surveyor	P)	~	Actions *
		Þ	Update	Resident
			Dischar	ge Resident

Figure 98: Update Resident

Adams, Jane L.	(29)			×
				* indicates required field
First Name *		MI		Last Name *
Jane		L		Adams
Room	Admit Date			
105	10/04/	2023		
	MM/DD/YYYY			
Surveyors			Residen	t in Initial Pool?
lenna.schott (P), CS	Ozias (98054), csmg	u∽	Mayb	e v
Subgroup				
Complaint		[FRI	
Completed				
– Interview	— Obs	ervation		 Record Review
Delete Resident				Cancel Save

Figure 99: Update Resident Pop-Up Window

- 16.4.2 Fill out the required information.
- 16.4.3 Click **Delete Resident**. The **Delete Resident** pop-up window opens. See *Figure 100, Delete Resident Pop-Up Window.*



Figure 100: Delete Resident

- 16.4.4 Click **Yes, Delete**.
- 16.4.5 Verify the resident has been removed from the resident list.

16.5 Discharge a Resident

Notes:

- A resident can only be discharged prior to **Finalize Sample**.
- The primary surveyor is the only surveyor who can discharge the resident.
 - 16.5.1 Click **Discharge Resident** under the **Actions** menu to discharge a resident. See *Figure 101, Discharge Resident*.

05/24/2024	NH_Singy_Contract_Surveyor	P)	~		Actions *	1
			Upda	ate F	Resident	
		Þ	Disc	harg	je Resident	

Figure 101: Discharge Resident

Notes:

• When the resident has no **Offsite** badge, the **Discharge Resident** pop-up window opens. See *Figure 102, Discharge Resident.* Click **Yes, Discharge.**

Discharge - PENA, AMY (8)		×
Are you sure you want to discharge the following resident? PENA, AMY (8)		
	Cancel	Yes, Discharge

Figure 102: Discharge Resident

• When the resident has the **Offsite** badge, the **Select Closed Record Reason** pop-up window opens. See *Figure 103, Select Closed Record Reason.* Click **Save**.

KENT, LEAH (2)	×
		* indicates required field
Select Closed Recor	d Reason	
Please indicate the r Record Review.	eason why KENT, LEAH (2) is being added to Closed	1
Reason *		
Select		
Description	✓ Select Expired Hospitalized	
	Planned Discharge Unplanned Discharge	//
		\
		Cancel Save

Figure 103: Select Closed Record Reason

16.5.2 Verify **Discharged** is shown under the resident name.



Note: The patient information is view only when a patient status is **Discharged**.

16.6 Admit a Resident

Notes:

- A resident can only be admitted prior to **Finalize Sample**.
- The primary surveyor is the only surveyor who can admit the resident.
- When an offsite selected resident is admitted, the resident is added back to the Initial Pool.
- When a non-offsite selected resident is admitted, the resident Initial Pool value is set as U, or Unknown.
 - 16.6.1 Click **Admit Resident** under the **Actions** menu to admit a resident. See *Figure 104, Admit Resident.*

PENA, AMY (8) Discharged	6078704 6	Trach, Wt loss, Maj Infection <u>(+3 more)</u>	13	-	-	-	05/24/2024	✓ Actions ▼ Update Resident
PETERSON, ADELE (4) Offsite	60787061	Hospice, Dialysis, Trach <u>(+3 more)</u>	13	-	-	-	05/24/2024	 Admit Resident

Figure 104: Admit Resident

16.6.2 Click Yes, Admit.

Admit - PENA, AMY (8)		×
Are you sure you want to admit the following resident? PENA, AMY (8)		
	Cancel	Yes, Admit

16.6.3 Verify **Discharged** is no longer shown under the resident's name. See *Figure 105, Admitted Resident.*

D PENA, AMY (8) 6078704 Trach, Wt loss, Maj Infection 13 — 6 (+3 more) (+3 more)	rach, Wt loss, Maj nfection 13 — (+ <u>3 more)</u>
---	--

Figure 105: Admitted Resident

16.7 Multiple Surveyors

Review *Table 16, Primary and Non-Primary Surveyor Roles* for more details on privileges.

Notes:

- More than one surveyor can be assigned to a resident in **Resident Manager**.
- One surveyor must be designated as the primary surveyor.
- The primary surveyor is the only surveyor who can change the Initial Pool value or discharge/admit the resident.
- Any survey team member can assign surveyors to a resident or change the primary surveyor.
- Surveyors can be unassigned from a resident if they do not have Initial Pool data and are not the primary surveyor.

Table 16: Primary and Non-Primary Surveyor Roles

	Primary Assigned	Non-primary assigned
	surveyor	surveyor
Change the Initial Pool value for a resident with an	V	
assigned surveyor	Χ	
Change the primary surveyor assigned to a resident	Х	Х
Delete a new admission resident with an assigned	V	
surveyor	X	
Discharge or admit a resident with an assigned	V	
surveyor	X	
Update a resident	Х	Х

16.8 Bulk Assign Surveyors

Note: Multiple residents may be assigned to one surveyor in a bulk action.

16.8.1 Click the check box to the left of a resident. The **Assign** field opens with a drop-down menu of available surveyors. See *Figure 106, Bulk Assign Surveyors.*

Q Search Residents Hide C	Completed Residents	Assign (4) to	Select ~ C
IP 💠 Resident 💠	Room 👌 MDS Indicators	BIMS	cmsgu_jgreen
Booke, Rita (15) Discharged New Admission	B-52		NH_Singy_Contra
Image: Second state	BC-12		NHCS_Singy surveyor_roberts
Dover, Eileen (9) Investigate New Admission	L-R-L		0 08/01/2024
Image: Weight of the second	60787049 Dialysis, Hospice, Trach (+3 more)	13	9 — — 05/24/2024
V Investigate Complaint New Admission	F-1		— — — 07/17/2024

Figure 106: Bulk Assign Surveyors

16.8.2 Select the surveyor to be assigned to the resident. A **Confirm Assignment** pop-up window opens. See *Figure 107, Confirm Assignment.*

Note: If the resident is already assigned to a surveyor, the selected surveyor will be added as an additional surveyor.

Confirm Assignment	×
Do you wish to assign the residents below to: NH_CMSGU_Singy? If the resident was already assigned, the selected Surveyor will be added as an additional Surveyor to the resident. • Clyde, Bonnie-Ann (14) • Dover, Eileen (9) • KENT, LEAH (2) • Legge, Peg (12)	
No Yes	

Figure 107: Confirm Assignment

- 16.8.3 Click Yes.
- 16.8.4 Verify the surveyor was added in the column under **Surveyor**.

17. Resident Initial Pool Screening

Purpose: To screen residents to include in the Resident Initial Pool.

Notes:

- Surveyors can use the Resident Initial Pool Screening area in <u>Resident Manager</u> to access the **Interview**, **Observation**, and **Record Review** screens to document comments and enter responses for care areas for each resident.
- Surveyors can hide completed residents from the resident list when all Initial Pool Areas are completed.
- The completion status for the Resident Initial Pool screening areas is also displayed on the <u>Update Resident</u> screen. It is not editable to surveyors from the **Update Resident** screen.
- See <u>MDS Information</u> for detailed information on viewing MDS assessment information.

17.1 Resident Initial Pool Screening Overview

Click any resident in <u>Resident Manager</u> to screen the resident. The detailed resident page opens. See *Figure 108, Resident Overview* and *Table 17, Resident Overview Detailed Callout.*

iitial Pool Room Admit Date BIM 60787049 05/24/24 13	S Complaints MDS indicators Dialysis, Hospice, Trach (<u>+3 more</u>)	i Interview Status Select	C Include in sample due to V None V	d Weight Calculator
e Interview f Obser	vation 9 Record Review			MDS Assessmen
Q Search Care Areas	Hide All Probes Show Only My Notes Sort: A	ž k	Completed	∃ Jump to Care Area
⊖ Choices				O 🖌 Add Notes
INTERVIEW				
Further Investigation No Issues/N O	A			
INTERVIEW Further Investigation No Issues/N Activities	A			🖊 Add Notes
INTERVIEW Further Investigation No Issues/N Activities INTERVIEW Further Investigation No Issues/N	A OBSERVATION A Further Investigation No Issues/NA			🖌 Add Notes
INTERVIEW Further Investigation Activities Further Investigation Further Investigation Dignity	A OBSERVATION A OBSERVATION Further Investigation No Issues/NA			 Add Notes Add Notes

Figure 108: Resident Overview Initial Pool

Table 17: Sample Resident Initial Poo	ol Detailed Callout
---------------------------------------	---------------------

No.	Section Detail	Description
а	Header	Resident Information from Resident Manager
b	Interview Status	Select: Interviewable, Non-Interviewable, Refused, Unavailable for Interview, Out of Facility, Representative Interview
с	Include in Sample	Immediate Jeopardy/Harm
		Helps calculate the percentage of weight gain or loss from information entered.
d	Calculator	Type weights in calculator. Click Save . Then click the weight calculator icon in care area notes to paste the value in the care area notes area. See <u>Care Area Notes</u> .
е	Interview	For more information, see <u>Resident Interview</u> .
f	Observation	For more information, see <u>Resident Observation</u> .
g	Record Review	For more information, see <u>Resident Record Review</u> .

No.	Section Detail	Description
h	Search Care Areas	Start typing the care area name and a list appears. Click on the care area name to jump to that care area on the screen.
i	Hide All Probes	Probe text is hidden by default. Uncheck box to view text. Probe text provides guidance that surveyors can reference when conducting interviews, observations, and record reviews.
j	Show Only My Notes	All surveyors' care area notes are viewable by default. To only show the notes of the surveyor who is logged in, check Show Only My Notes check box.
k	Sort A to Z	The care areas are organized by quality of life and resident rights, followed by quality of care. To arrange the care areas alphabetically on the screen, click on the A to Z toggle.
I	Completed	Mark the Interview area complete. All care areas do not have to be marked with response options to mark the interview complete.
m	Jump to Care Area	For more information, see <u>Pull-Out Care Area Menu</u> .
n	MDS Assessment	For more information, see MDS Assessment.
0	Add Notes	For more information, see <u>Care Area Notes</u> .

17.2 Care Area Menu

Note:	The care area menu has 3 separate tabs: (RI) Interview, RO (Observation),
	RR (Record Review). A filled green circle indicates the surveyor has entered
	a response option for the care area. Click any tab to look at care areas for
	interview, observation or record review.

Click **Jump to Care Area** to open the care area menu. See *Figure 109, Jump to Care Area*. The **Care Area** side menu opens. See *Figure 110, Care Areas Side Menu* and *Table 18, Care Areas Side Menu Detailed Callout*.

	C MDS Assessment
Completed	≡ Jump to Care Area

Figure 109: Jump to Care Area

Completed × Close Care Areas g
Sort: AZ
Choices
Activities
💮 Dignity
📀 Abuse
Resident-to-Resident Interaction
O Privacy
Accommodation of Needs (physical)
Mood/Behavior
Personal Funds
Personal Property
Sufficient Staffing
Participation in Care Planning
🔿 Discharge
C Environment
C Food
🔿 Dental

Figure 110: Care Areas Side Menu

Table	18 :	Care	Areas	Side	Menu	Detailed	Callout
-------	-------------	------	-------	------	------	----------	---------

No.	Section Detail	Description
а	RI Interview	Resident Interview tab with care areas.
b	b RO Observation Resident Observation tab with care areas.	
c RR Record Record Review tab with care areas.		Record Review tab with care areas.
d	Thumbtack icon	Click to pin the menu to the side of the screen. Click again to unpin.
е	e X Click to close window	
f	Sort AZ	Click to sort the care areas by alphabetical order.
g	x Close Care Areas	Click to close menu

17.3 Care Area Notes

Notes:

- Care area notes default to read only.
- Surveyors can edit their own notes and add additional notes.
- All surveyors' care area notes are viewable by default. Check Show Only My Notes check box to show only the notes of the surveyor who is logged in. See <u>Resident Initial Pool Screening Overview</u> for more details.
 - 17.3.1 Click **Add Notes**. See *Figure 111, Care Area Notes Icon*. The care area splits into two columns. See *Figure 112, Care Area Notes* and *Table 19, Care Area Notes Detailed Callout.*
 - Note: The left column displays the response options and probe text (when **Hide All Probes** is unchecked). The right column displays a text area with a tool bar.

Completed	≡ Jump to Care Area		
	→	🖍 Add Notes	

Figure 111: Care Area Notes Icon

O Choices	e X Close Notes
ITERVIEW Further Investigation No Issues/NA	0 ≗ ⊼ ¥ 10 5 ♂ B I ⊻ ∠ ∽ … Rubik → 12pt ∽ ⊞ E ∰ ⊕ ① 0
	0

Figure 112: Care Area Notes

No.	Description					
а	Care area					
b	 Standard toolbar functions Highlighted specialty toolbar functions: Add date/time stamp Add Resident ID Calculator Type weights in Weight Calculator. Click Save. Then click the weight calculator icon to paste the value in the notes. 					
с	Horizontal ellipsis. Click to open second row of formatting choices. Click again to close row.					
d	Text area. Type/view care notes.					
е	Close Notes					

Table 19: Care Areas Side Menu Detailed Callout

17.3.2 Click **Close Notes** to close notes. Notes appear under the care area. See *Figure 113, Care Area Entered Notes.*

Notes:

- Notes are saved automatically.
- The surveyor and date/time stamp for last saved are displayed at the bottom of the note. To review the note or additional notes, click **Add Notes**. Click the time icon to add an additional time/date when the notes are not written at the same time.



Figure 113: Care Area Entered Notes

17.4 Minimum Data Set (MDS) Discrepancy

Notes:

- If Resident Assessment has not been triggered and there are residents who are marked with MDS Discrepancy and is not Further Investigation (FI), then Resident Assessment will be triggered at start sample finalization and the resident will be added at that time.
- When a care area is marked as an MDS Discrepancy and is not FI, the resident is automatically added to Resident Assessment if the facility task is triggered for a linked Intake or manually initiated prior to final sample.
- See <u>MDS Information</u> for detailed information on viewing MDS assessment information.

Click the checkbox next to **MDS Discrepancy** when a care area has an MDS discrepancy during interview, observation, or record review. See *Figure 114, MDS Discrepancy Checkbox*.

Note: Only care areas mapped to an MDS indicator have an **MDS Discrepancy** checkbox.

Nutrition	
OBSERVATION O Further Investigation No Issues/NA	MDS Discrepancy

Figure 114: MDS Discrepancy Checkbox

17.5 Surveyor Assignment

Purpose: To assign multiple surveyors on the survey team to the resident.

The assigned surveyor can perform the following tasks in the Initial Pool area. See *Table 20, Assigned Surveyor Roles.*

Note: Surveyors not assigned to the resident view the Initial Pool area in read only mode.

Task	Primary Assigned Surveyor	Non-primary Assigned Surveyor
Mark a resident with Harm/IJ	Х	Х
Mark Interview, Observation, or Record Review Complete	Х	x
Mark the care area response options for Interview, Observation, Record Review	Х	x
Edit care areas marked with FI (original surveyor only)	х	x
Edit the MDS Discrepancy (original surveyor only)	Х	Х
Edit an Additional Care Area in Record Review that has no response options. Only the original surveyor can edit the Additional Care Area that has a response.	x	x
Edit own comments for a care area	Х	Х
Edit the Initial Pool status indicator to any option	Х	
Edit the Interview Status to any option	Х	
Edit the interview Status to Representative Interview only	x	x

Table 20: Assigned Surveyor Roles

17.6 Include a Resident in Initial Pool

```
Note: The initial pool status selector can only be changed by the primary surveyor.
```

- 17.6.1 Click **Initial Pool** status to change the initial pool status for a resident to yes. See *Figure 115, Initial Pool Status.* The **Initial Pool** status window pops up.
 - **Note**: The initial pool status can be selected wherever it is found on the screen. The figure below is one example where the status is found.



Figure 115: Initial Pool Status

17.6.2 Select the radio button next to **Yes**. See *Figure 116, Initial Pool Status Change.*



Figure 116: Initial Pool Status Change

Note: Offsite-selected residents show MDS indicators. See *Figure 117, Initial Pool Status Change with MDS Indicators.*



Figure 117: Initial Pool Status Change with MDS Indicators

- 17.6.3 Click Save.
- 17.6.4 Verify the initial pool status is now Y.

17.7 Resident Interview

Notes:

- The Interview tab is the default tab.
- Mark the **Interview** tab **Completed** marks the **Interview** tab with a green check mark. See *Figure 118, Interview Tab Completed.*

Γ	Interview 🔗	Observation	Record Review 🥝			.≇ <u>PBJ S</u>	taffing 🔽 Completed
	Q Search Care Areas	– H	ide All Probes 🗌 Show On	ily My Notes Sort: Aż	ຼາ Expand All	ျမ Collapse Completed	

Figure 118: Interview Tab Completed

17.7.1 Edit the Care Areas.

Select an interview status to edit the **Interview** tab. See *Figure 119, Select Interview Status.* The care area responses become editable.

No Issues/NA (NI):	Marks the care area with a green check mark.		
NA:	Dialysis, smoking, hospice, ventilator, and transmission-based precautions care areas have a separate NA option.		
Further Investigation (FI):	Marks the care area with a yellow circle with an exclamation point inside. See <i>Figure 120, Further Investigation</i> <i>Indicator</i> .		
	() Abuse		



Figure 119: Further Investigation Indicator

Notes:

- Care Area response options are disabled until the Initial Pool status is **Yes**.
- Care areas shared by **Interview** and **Observation** are combined and displayed on the **Interview** tab.

itial Pool Room Admit Dat	a BIMS Complaints	MDS Indicators		Interview Status	clude in sample due to	
LY-M 01/08/19	05	ADLs, ADLs, ADLs (<u>+9 more)</u>		✓ Interviewable	None ~	Weight Calculator
Interview	Observation	Record Review		Non-Interviewable Refused Unavailable for Interview		[2] <u>MDS Assessmen</u>
Q Search Care Areas	✓ H	ide All Probes Show Only My	Notes Sort: Aʻz	Out of Facility Representative Interview	Completed	≡ Jump to Care Are
() Choices						🖌 Add Notes
Further Investigation) No Issues/NA					
Activities						🖍 Add Notes
NTERVIEW) No Issues/NA	WATION				

Figure 120: Select Interview Status

- 17.7.2 Resident Representative Interview.
 - 17.7.2.1 Change the **Interview Status** to **Representative Interview** when a resident is noninterviewable, but a representative is available.
 - 17.7.2.2 Click **RRI Contact**. See *Figure 121, RRI Contact*. The **RRI Contact Info** opens.



Figure 121: RRI Contact

17.7.2.3 Type the contact information for the resident representative in the pop-up window. See *Figure 122, RRI Contact Info Pop-Up Window*.

Torrey Marvin (126323) - <mark>RRI Conta</mark>	<mark>ct Info</mark> ×
Contact Info	
Joseph Torrey 123 Main St Marion, OH	
	Save

Figure 122: RRI Contact Info Pop-Up Window

17.7.2.4 Click Save.

17.7.2.5 The RRI contact icon appears next to the **RRI Contact** link. See *Figure 123, RRI Contact Icon.*

Note: The icon shows that there is an RRI contact. Hover over the icon to see the contact information.



Figure 123: RRI Contact Icon

17.7.2.6 Click RRI Contact to edit.

17.8 Resident Observation

Notes:

- Care areas shared by **Interview** and **Observation** are combined and displayed on the **Interview** tab.
- The care areas unique to Observation only display on the **Observation** tab.
- Mark the **Observation** tab **Completed** marks the **Observation** tab with a green check mark. See *Figure 124, Observation Tab Completed.*

Note: All care areas do not have to be marked with response options to mark the Observation **Completed**.

Interview	Observation Occ	rd Review 📀	11 <u>PBJ Staffing</u> Completed
Q Search Care Areas	Hide All Probe	es 🗌 Show Only My Notes Sort: Az	a^n Expand All a^+ Collapse Completed \equiv Jump to Care Area

Figure 124: Observation Tab Completed

Click the **Observation** tab to view the care areas specific to Observation.

Note: The Initial Pool status must be Y (Yes) to edit the Observation.

17.9 Resident Record Review

Notes:

- Mark the **Record Review** tab **Completed** marks the **Record Review** tab with a green check mark. See *Figure 125, Record Review Tab Completed*.
- All care areas do not have to be marked with response options to mark the Record Review complete.

Interview	Observation 😔	Record Review			≛ <u>PBJ Staffir</u> 1 ✓ Completed
Q Search Care Areas	+	Additional Care V Hide A Areas Probes	Show Only My S Notes /	iort: 과 Expand Ajz All	

Figure 125: Record Review Tab Completed

17.9.1 Click the **Record Review** tab to view the care areas specific to Record Review.

Note: The Initial Pool status must be Y (Yes) to edit the Record Review.

17.9.2 Click Additional Care Areas to see a list of other care areas to add to Record Review. See *Figure 126, Additional Care Areas.*

Additional Care Areas ×			
Abuse			
AC			
Accident Hazards			
Accommodation of Needs (physical)			
Activities 🛿			
<u>Cancel</u> Update			

Figure 126: Additional Care Areas

- 17.9.3 Click **Update** to add additional care areas to **Record Review**.
 - **Note**: Once a response option is recorded for a Care Area, it cannot be removed from the **Additional Care Areas** list. Remove the response option first to remove the Care Area from Resident Record Review.

18. Closed Record Sample

Purpose: The Closed Record Sample screen displays residents who are identified as Expired, Hospitalized or Discharged in the last 90 days from the survey start date.

Notes:

- The TC is the only one who has edit access to closed record sample. All other team members have read-only access.
- It is not necessary to find a resident for a specific area when the system does not identify a resident for an area.

18.1 Overview

Click **Closed Record Sample** on the drop-down left menu under **Initial Pool**. The Closed Record Sample window opens to the **Closed Record Candidates** tab. See *Figure 127, Closed Record Sample Candidates* and *Table 21, Closed Record Sample Candidates Detailed Callout.*

Notes:

- Only the TC has edit rights to **Closed Record Sample** candidates. All survey team members have view only rights.
- All Residents tab displays all the residents in the facility.

- Closed Record Candidates (default view) tab displays:
 - Residents are preselected by the system. The Area of Investigation is not editable.
 - Offsite selected residents in **Resident Manager** who were discharged during the initial pool process.
 - Offsite selected residents, when the Intake Closed Record reason is selected in Offsite Prep and the resident is discharged with a different Closed Record Reason. In the Closed Record Candidates screen, the system displays the Resident Closed Record Reason, the COMP/FRI badge next to the CR resident, and shows a link to the active intake.
 - Non-Offsite Selected Residents, when the Intake Closed Record reason is selected in Offsite Prep and the non-offsite resident is discharged with no Closed Record Reason then the resident will not be displayed on the Closed Record Candidates screen.
 - Residents linked to an intake in **Offsite Prep** with an **Intake Closed Record** reason and/or **Resident Closed Record** reason.

Note: View Intake link is shown in the Intake column when a resident is linked to an intake from Offsite Prep.



Figure 127: Closed Record Sample Candidates

Table 21: Closed Record Sample C	Candidates Detailed Callout
----------------------------------	-----------------------------

No.	Detail	Description	
а	Information icon	Hover over icon for details on the types of discharge reasons.	
b	Search Residents	Search for a specific resident	
С	c Finalize Closed Record Sample Check the box next to Finalize Closed Record Sample Check the box next to Finalize Closed Record Sample once all residents are selected. The residents selected for closed record sample displayed on the Finalize Sample and Inverse Assignments screens.		
d	Resident	Lists the resident and their room number.	
е	Offsite	The Offsite badge shows in this field when the selected resident is an offsite-selected resident.	
f	Sys Selected	Shows System Selected badge when the closed record sample was selected by the system.	
g	Intake	Links to the complaint.	
h	Reason	Shows reason. Hover over icon to view description. Not all residents have a reason.	
i	Area of Investigation	Select the area of investigation from the drop- down menu. Only for nonsystem selected residents.	

18.2 Add a Closed Record Sample Candidate

Purpose: To add additional Closed Record Candidates.

- 18.2.1 Click the **All Residents** tab.
- 18.2.2 Click the checkbox next to the resident.
 - Note: A warning message pops up when the resident is an active resident. See *Figure 128, Active Resident Pop-Up Window.* Click **Yes** to add the resident to the **Closed Record Candidate** tab.

Active Resident		×		
An active resident cannot be added for a closed record review. Adding this resident to the Closed Record Candidates list will cause them to be marked for Discharge				
(D/C) and their Initial Pool status will be changed to 'No'. Do you wish to continue?				
	No	<u>Yes</u>		

Figure 128: Active Resident Pop-Up Window
18.3 Remove a Closed Record Sample Candidate

18.3.1 Click the **Closed Record Candidates** tab.

18.3.2 Deselect the checkbox next to the resident.

- Type a rationale in the textbox when a system-selected resident is removed.
- A system-selected resident and offsite-selected resident remain on the **Closed Record Candidates** tab even when they are deselected.
- All other residents are removed from the **Closed Record Candidates** tab when they are deselected.

18.4 Finalize the Closed Record Sample Candidate

Notes:

- All residents in the **Closed Record Candidates** tab with a checkmark next to their name are included on the **Finalize Sample** and **Investigation Assignments** page after the closed record selection is finalized.
- Closed Record Candidates are not assigned to a surveyor.

Click the **Finalize Closed Record Sample** checkbox. See *Figure 129, Finalize Closed Record Sample Checkbox.*

- The closed record selection must be finalized before starting the sample selection process.
- Once Finalize **Closed Record Sample** is checked, the **Closed Record Sample** is read only to all users.



Figure 129: Finalize Closed Record Sample Checkbox

19. Finalize Sample

- **Purpose**: To finalize the sample of residents once observations, interviews and records have been reviewed.
- **Note:** The tabs display data gathered from the initial pool process and provides the survey team with information to help choose residents to include in the sample for investigation.
- **19.1** Click **Finalize Sample** on the drop-down left menu under **Initial Pool**. The **Finalize Sample** window opens to the **Current Sample Candidates** tab. See *Figure 130, Finalize Sample Candidates* and *Table 22, Finalize Sample Candidates Detailed Callout.*

- Only the TC can edit the **Finalize Sample** page.
- Actions are disabled until **Start Sample Finalization** is selected.

SPECIAL FOCUS STATUS		
Active	Finalize Sample (Read Only)	
Basic Information		0
Teams	All Residents 14 Current Sample Candidates 9 Final Sample 4	alization Finalize Sample
LTCSP		
Survey Prep ^	Sample Successfully Finalized	
Offsite Prep	G Expand All Facility Census 12 4/8 Target	t Sample Size x Close Care Areas
Entrance Conference		
Team Meeting	Sample Resident † Room † #CAs † Offsite † Unnec 5 Sys Selected † 1J/Harm † Intake † Surveyor † Meds	Rout: 47 Show No Coverage Only
Initial Pool		
Resident Manager	Cive, Bonne-Ann BC-12 10 Yes System Selected A View Intake NHCS_Singy Actions	Abuse COMP 3/3
Closed Record Sample	INCLUDE CARE AREA IN INVESTIGATION	Accidents COMP (3/3)
Finalize Sample	Y Abuse	
Investigation 🗸	Y Accidents	Accident Haza COMP 1/1
Resources 🕁	Y Advance Directives	• Falls COMP (1/1)
	Datysis	
Citations	Y Nutrition	Smoking 1/1
Statement of Deficiencies	Y Physical Restraints	
🔆 CMS-670	Y Resident Assessment TASK	

Figure 130: Finalize Sample Candidates

Table 22: Finalize Sample Candidates Detailed Callout

No.	Detail	Description
а	All Residents	All available residents
b	Current Sample Candidates	Current residents in the sample
С	Final Sample	Final residents chosen
d	Start Sample Finalization	Click to start sample finalization. Closed Record Sample must be finalized first.
е	Finalize Sample	Click to complete task
f	Search Residents	Search list of residents
g	Expand All Click checkbox to expand information	
h	Facility Census	Shows the total residents
i	Target Sample Size	Automatically calculates the target sample size based on Facility Census and Sample Candidates.
j	Close Care Areas	Care Areas are open by default. Click to close.
k	Show No Coverage Only	Click to filter to carea areas with no coverage
I	l Resident Detail	Resident detail is open by default. Click caret to close. Review the care areas under investigation. Links are
		clickable, but no information can be modified.
m	Unnec Meds	Click to view Unnecessary Meds Calculation Details pop-up window that shows details on why resident was selected for unnecessary medications
n	View Intake	Click to view intake details
ο	Actions	Click to Update Resident, Modify Care Areas, and Discharge Unnecessary Meds Candidate

19.2 Click the checkbox next to **Start Sample Finalization**. The **Unnecessary Medications Resident Selection** window pops up. See *Figure 131, Unnecessary Medications Resident Selection*.

Note: **Unnecessary Medications** shows information about residents who have been selected to have their medication reviewed.

Unnecessary Medications Resident Selection	\times
 The following residents are selected for Unnecessary Medication Review: Spencer, Candace (13) for medication and diagnosis information from MDS data and/or selections made during the IP Record Review Clyde, Bonnie-Ann (14) for medication and diagnosis information from MDS data and/or selections made during the IP Record Review KENT, LEAH (2) for medication and diagnosis information from MDS data and/or selections made during the IP Record Review Dover, Eileen (9) for medication and diagnosis information from MDS data and/or selections made during the IP Record Review Legge, Peg (12) for medication and diagnosis information from MDS data and/or selections made during the IP Record Review 	
No Residents taking Insulin were found No Residents taking Anticoagulants were found No residents taking an Antipsychotic with Schizophrenia diagnosis were found No residents taking an Antipsychotic with Alzheimer's/Dementia diagnosis were found	

Figure 131: Unnecessary Medications Resident Selection

- **19.3** Click **OK** to close window. The **Finalize Sample** page is then enabled, and samples can be reviewed.
 - **Note**: The badges next to each care area show whether the care area is associated with a facility task or whether the resident was system-selected.
- **19.4** Click any care areas that are linked to view notes. See *Figure 132, Care Area Detailed Information.*

Infection Control				×
JOHNSON, HELLEN (9)				
07/24/2024 4:06 PM The patient was not able to be interviewed. Follow-up in August.				
Copy notes to 🗸 🗸 🗸		Change TBP to NA	Cancel	Save

Figure 132: Care Area Detailed Information

Notes:

- Click **Copy notes to** copy notes to another care area.
- Click **Change TBP to NA** to change the response to N/A.
- Not all care areas have the same details available on the pop-up windows.
- **19.5** Click a green **Y** response to change it to an **N** response. If there are not enough patients in the sample, a warning window opens stating that there are not enough residents in that area. It is still possible to remove the response by providing a rationale. **Select Yes, Remove**. See *Figure 133, Remove a Resident Care Area*.

Warning - Resident Care Area Removal	×
Resident Johnson, Hellen (9)	
You do not have any sampled residents for Insulin. Are you sure you want to remo Johnson, Hellen (9)	ove this care area for
Cancel	Yes, Remove

Figure 133: Remove a Resident Care Area

- **19.6** Click the **Actions** menu to **Update Resident** information, **Modify Care Areas** or **Discharge Unnecessary Meds Candidate.**
- **19.7** Click **Finalize Sample**.
- **19.8** Verify the blue notification banner confirms the sample was finalized. See *Figure 134, Sample Successfully Finalized Blue Notification Banner.*



Figure 134: Sample Successfully Finalized Blue Notification Banner

Note: When the sample is not ready to be finalized, a warning window opens with details of what needs to be reviewed or updated. See *Figure 135, Finalize Sample Warning Window.* Type a rationale in the Rationale box to override the warning and click **Save**.

Please the wa	review the warning below. If you would like to save anyway, enter a rationale for overriding rnings and click Save. Finalizing the sample is a permanent action that cannot be reversed one.
3 Wa	rnings
1	Sample should include at least one Dialysis resident.
Ŀ	Sample should include at least one Dialysis resident.
1	The following Care Area(s) have resident(s) marked for Further Investigation, but have no one in the sample: Activities, Dialysis, Dialysis, Accidents, Abuse, Pressure Ulcer/Injury, Care Planning, Pain Management, Behavioral-Emotional, Nutrition
Ratio	nale *
Pro	wide a rationale for overriding the above warnings.

Figure 135: Finalize Sample Warning Window

20. Investigation Assignments

Purpose: To provide a snapshot of how the work is distributed among the team members. It is used to help balance the survey team's workload.

- Only the TC can update Investigation Assignments.
- Multiple Surveyors can be assigned to a row.
- A Primary Surveyor must be selected for Facility Tasks Dining Observation, Infection Control, and Sufficient and Competent Nurse Staffing.
- Surveyors with drawings, responses, Investigation Notes, observations, or manually-added residents cannot be removed from an Investigation Area.
- Surveyors with drawings, responses, notes, observations, or manually added residents cannot be removed from a Facility Task.
- Investigative areas that have no residents with those specific concerns do not show on the list.
- Mandatory tasks always appear in the list.
- Changes made in Investigation Assignments are reflected in Facility Tasks.

20.1 Navigate to Investigation Assignments

Click **Assignments** on the drop-down left menu under **Investigation**. The Investigation Assignments window opens. See *Figure 136, Investigation Assignments* and *Table 23, Investigation Assignments Detailed Callout.*

Note: Columns are sortable.

Survey 1CCD24-H1 Marion Manor NH CCN 015651	Investigati	on Assignment	S					
Nursing Home	Pat NH_ActiveP	ProviderRole_Singy: 0 Pat c	msgu_jgreen: 0 Pat NHCS	Singy: 4 Pat NH_CMS	GU_Singy: 2 Pat NH_CMS_Contract:	Surveyor_Singy: 0 Pat NH_Si	ngy_Contract_Surveyor: 0	
Basic Information	Pat surveyor_roberts	s_alabama: 0 a						
Teams			_			ssian (1) to	Filter Rv	
LTCSP	Q Search Reside	nts or Investigative Areas	b			Select ~	Cancel Select	
Survey Prep ~		ius Areas 🔥 O Investigati	in Areas Nat Assigned					
Initial Pool	0 lotal investigat	tive Areas 🛛 🕂 U Investigati	Ve Areas Not Assigned	Number of		Number of Resident		
Resident Manager		Resident ¢	g Room	Investigative Areas	Investigative Area 👙	with IA	Assigned To	
Closed Record Sample		Facility Tasks		1	Kitchen	1	NHCS_Singy	~
Finalize Sample								
Investigation		Facility Tasks		1	Beneficiary Notification	1	NHCS_Singy	~
Assignments								
Facility Tasks		Facility Tasks		1	Resident Council	1	NHCS_Singy	¥
Investigations		Facility Tasks		1	Dining Observation	1	NHCS_Singy (P)	~
Potential Citations								
Resources 🕁		Facility Tasks		1	Medication Storage and Labeling	1	Select	~

Figure 136: Assignments Left Menu

Table 23: Investigation Assignments Detailed Callout

No.	Detail	Description		
а	Survey Team Members names	All available survey team members		
b	Search	Search list of residents by first or last name or resident ID. Also search investigative areas by name.		
С	Assign to	Select the surveyor or surveyors to assign the investigation when selecting numerous lines. This field only appears when at least one line is selected.		
d	Filter By	Filter by surveyor name or unassigned		
е	Total Investigative Areas and Investigative Areas Not Assigned	Shows the total investigative areas and the unassigned areas.		
f	Resident	Resident name or Facility Tasks		
g	Room	Resident room number, if applicable		
h	Number of Investigative Areas	Number of investigative areas for the resident		
i	Investigative Area	The area being investigated		
j	Number of Residents with IANumber of residents who have that specific investigative area			
k	Assigned To	The surveyor or surveyors who are assigned to the investigation		

20.2 Assign a Surveyor to an Investigation

20.2.1 Select the **Investigative Area** and select the surveyor or surveyors under the drop-down menu under **Assigned To**. See *Figure 137, Assign a Surveyor to an Investigation.*

Resident 🛊	Room 💠	Number of Investigative 👙 Areas	Investigative Area 🖕	Number of Residents with IA [‡]	Assigned To 🖕
Facility Tasks		1	Kitchen	1	NHCS_Singy
Facility Tasks		1	Beneficiary Notification	1	NH_CMS_ContractSurveyor_S
Facility Tasks		1	Resident Council	1	test2.ContractSurveyorCMS.Ch

Figure 137: Assign a Surveyor to an Investigation

20.2.2 Verify a green task banner confirms the surveyor was updated. See *Figure 138, Facility Task Surveyors Green Notification Banner.*



Figure 138: Facility Task Surveyors Green Notification Banner

20.3 Bulk Assign Investigations

- 20.3.1 Select as many Investigative Areas as desired. The Assign [number] to drop-down menu appears at the top of the screen. The number represents the number of lines selected.
- 20.3.2 Select the surveyor or surveyors under the drop-down menu under **Assigned [number] to**. See *Figure 139, Bulk Assign Investigations.*



Figure 139: Bulk Assign Investigations

- 20.3.3 The **Confirm Assignment** pop-up window opens and asks for confirmation to assign the surveyor or surveyors. See *Figure 140, Confirm Assignment Pop-Up Window.*
 - **Note**: Be aware that a selected surveyor may be overriding a current surveyor when an investigative area was already assigned.



Figure 140: Confirm Assignment Pop-Up Window

- 20.3.4 Click **Yes**.
- 20.3.5 Verify a green task banner confirms the surveyor was updated. See *Figure 141, Facility Task Surveyors Green Notification Banner.*



Figure 141: Facility Task Surveyors Green Notification Banner

21. Facility Tasks

Purpose: To guide the investigation with mandatory and triggered tasks.

21.1 Facility Tasks Overview

There are two types of facility tasks: Mandatory and Triggered.

- The following Mandatory Tasks are displayed for all initial and recertification surveys:
 - Beneficiary Notification
 - Dining Observation
 - Infection Control
 - o Kitchen
 - Medication Administration
 - Medication Storage and Labeling
 - o QAPI and QAA
 - o Resident Council
 - o Sufficient and Competent Nurse Staffing
- The following are Triggered Tasks for initial and recertification surveys:
 - Arbitration

Note: Arbitration can also be triggered based on answers in Entrance Conference or Resident Council

- o Environment
- Personal Funds
- o Resident Assessment
- Extended Survey
- Triggered Tasks are displayed when any one of the following occurs:
 - o A surveyor manually initiates a triggered task
 - The triggered task is linked to an intake in offsite prep
 - $\circ~$ A resident with FI for a Care Area can trigger these tasks at final sample

21.2 Navigate to Facility Tasks

Click **Facility Tasks** on the drop-down left menu under **Investigation**. The **Facility Tasks** window opens to the **All Tasks** tab. See *Figure 142, Facility Tasks Left Menu.*

LTCSP	
Survey Prep	~
Initial Pool	~
Investigation	~
Assignments	
Facility Tasks	
Investigations	
Potential Citations	
Resources 🕁	

Figure 142: Facility Tasks Left Menu

21.3 View the Facility Tasks List

The **Facility Tasks** page shows all facility tasks, assigned surveyors, including primary surveyor, if any, potential citations, and a task process bar beneath each task. See *Figure 143, Facility Tasks List* and *Table 24, Facility Tasks List Detailed Callout*.

Home / Marion Manor NH / Survey 1DF843-H1			IJ =₊	*
Bacility Tasks a b All Tasks 1				+ Add New Task
Facility Task 💠	Assigned to d	Primary	Potential Citations	1
Arbitration	NHCS_Singy, surveyor_roberts_alabama (918_ v			≅ g
Beneficiary Notification	NHCS_Singy ~		-	2
Dining Observation Complaint FRI	cmsgu_jgreen, NH_Singy_Contract_Surveyor_ v	NHCS_Singy ~	<u>F0804</u> , <u>F0808</u>	8
Infection Control	NH_CMSGU_Singy ~	NH_CMSGU_Singy ~	-	ê
Kitchen	NHCS_Singy ~		<u>F0812</u>	8
Medication Administration	NHCS_Singy, surveyor_roberts_alabama (918 v		-	2

Figure 143: Facility Tasks List

Table 24: Facility Tasks List Detailed Callout

No.	Name	Description
а	All Tasks	This is the default page and shows all tasks for the team.
b	My Tasks	Click this tab to see the tasks assigned to the surveyor. The residents are shown when the surveyor is both primary and nonprimary.
с	Task Completion Progress Bar	Shows the task completion percentage. Hover over the line to view surveyor progress. All Surveyor Progress and Primary Surveyor Progress is shown. Each time tasks are completed by team members, progress is updated.
d	Assigned to	Shows all surveyors to whom the facility task is assigned. More than one surveyor can be selected from the drop- down menu showing all the surveyors on the team. See <u>Assign a Surveyor to a Facility Task</u> or <u>Remove a Surveyor</u> <u>from a Facility Task</u> for more details.
е	Primary	Shows the primary surveyor. The task is disabled when a primary surveyor is not selected.
f	Potential Citations	Lists tags related to questions with a decision of noncompliance for all assigned surveyors. Bold texted tags are tags that the surveyor cited.
g	Trashcan	Click to remove a Facility Task. Review <u>Remove a Facility</u> <u>Task</u> for details.

21.4 Assign a Surveyor to a Facility Task

21.4.1 Click the drop-down menu under **Assigned to** on the desired facility task row. All survey team members are shown in the menu. See *Figure 144, Assign a Surveyor Drop-Down Menu*.

Facility Task 🍦	Assigned to
Arbitration	Select ~
Beneficiary Notification	CS0zias (98054)
Dining Observation	CSOzias (98054), jnewlon08, lenna.schott
Infection Control	✔ CS0zias (98054)
	✓ jnewlon08
<u>Kitchen</u>	✓ lenna.schott
Medication Administration	test2.ContractSurveyorCMS.Chinn (14124)

Figure 144: Assign a Surveyor Drop-Down Menu

21.4.2 Check the box next to surveyor to be added.

- The surveyor can only add themselves to the task. Only the TC can add other surveyors.
- The All selection on the drop-down menu shows only for the TC.
- 21.4.3 Verify the green notification banner appears. See *Figure 145, Facility Task Surveyors updated successfully.*



Figure 145: Facility Task Surveyors updated successfully

21.4.4 Does the task require a primary surveyor?

Note: These tasks require a primary surveyor:

- Dining Observation
- Infection Control
- Sufficient and Competent Nurse Staffing

If yes, select a primary surveyor from the drop-down menu under **Primary**. Only the TC can select a primary surveyor. If no primary surveyor is required, no field appears under **Primary**.

21.4.5 Verify the green notification banner appears. See *Figure 146, Facility Task Staff ID updated successfully Notification Banner.*

Facility Task Staff ID updated successfully

Figure 146: Facility Task Staff ID updated successfully Notification Banner

21.5 Remove a Surveyor from a Facility Task

- 21.5.1 Click the drop-down menu under **Assigned to** on the desired facility task row. All survey team members are shown in the menu.
- 21.5.2 Uncheck the box next to surveyor to be removed.

Notes:

- The surveyor can only remove themselves from the task. Only the TC can remove other surveyors.
- Only surveyors without data on the specific Facility Task can be removed from that task.
- The All selection on the drop-down menu shows only for the TC.
- 21.5.3 Verify the green notification banner appears. See *Figure 147, Facility Task Surveyors updated successfully Notification Banner.*

Facility Task Surveyors updated successfully

Figure 147: Facility Task Surveyors updated successfully Notification Banner

21.6 Add a Facility Task

- **Note**: Tasks that require a <u>primary surveyor</u> are disabled until the primary surveyor is added.
 - 21.6.1 Click + Add New Task to add a new task. See *Figure 148, Add New Task.* The Select One or More Task(s) pop-up window opens.



Figure 148: Add New Task

- Note: + Add New Task clickable link only appears when all the available tasks are not on the All Tasks page.
- 21.6.2 Select one or all tasks from the drop-down menu. See *Figure 149, Select One or More Task(s).*

Select One or More Task(s) ×					
	 indicates required field 				
Please select any tasks you would like to initiate.					
Tasks *	/				
Select					
	Save Cancel				
Personal Funds					
Environment	×				

Figure 149: Select One or More Task(s)

- 21.6.3 Click **Save**.
- 21.6.4 Verify green notification banner appears. See Figure 150, Facility Task created successfully Notification Banner.



Figure 150: Facility Task created successfully Notification Banner

21.7 Remove a Facility Task

Notes:

- Only the TC can remove tasks.
- Only tasks without data can be removed.

The task cannot be removed

The trashcan is not clickable, and the black notification box opens when the task cannot be removed because it is linked to an intake in Offsite Prep. See *Figure 151, Task is Linked to an Intake and Cannot Be Removed.*



Figure 151: Task is Linked to an Intake and Cannot Be Removed

The task cannot be removed until data is removed

The trashcan is clickable, and a pop-up window opens that explains what needs to be done before the task can be removed. See *Figure 152, Task Contains Data and Cannot Be Removed Until Data is Removed.*

Infection Control Removal	×
This Facility Task contains data for the following surveyors: • ratched.rachel You cannot remove this Task until the data is removed.	
	ОК

Figure 152: Task Contains Data and Cannot Be Removed Until Data is Removed

The task can be removed

21.7.1 Click the trash icon on the facility task line to remove the facility task. See *Figure 153, Remove a Facility Task*. The **Enter Task Removal Rationale** pop-up window opens.

Facility Tasks			
All Tasks 14	My Tasks 6		
Facility Task 🕴	Assigned to	Primary	Potential Citations
Arbitration	Select	~	- 🔒
Beneficiary Notification	CSOzias (98054), lenna.schott	~	F0582 😭

Figure 153: Remove a Facility Task

21.7.2 Select the rationale from the drop-down menu under **Rationale**. See *Figure 154, Enter Task Removal Rationale Pop-Up Window.*

Enter Task Removal Rationale			
Please enter the rationale for removing the	* indicates required field		
Rationale * Select Info is inaccurate for triggered task Other, describe			
Description, if necessary			
	Save Cancel		

Figure 154: Enter Task Removal Rationale Pop-Up Window

21.7.3 Type a description, if necessary.

- It is necessary to add a description when **Other, describe** is selected.
- Save is grayed out until all required fields are filled out.
- 21.7.4 Click **Save**. The task is removed from the **Facility Tasks** list.

21.8 Open a Facility Task

Click any task in the **Facility Tasks** list to open it and view details. See *Figure 155, Clickable Facility Tasks Links.* The task opens in the same window.

Facility Tasks		
All Tasks 14	м	ly Tasks 🤞
Facility Task 🝦		
Arbitration		
Beneficiary Notification		
Dining Observation FRI		
Environment		
Extended Survey		
Infection Control		

Figure 155: Clickable Facility Tasks Links

Notes:

- Clickable links are available in the My Tasks tabs as well.
- Tasks are editable only for the surveyors assigned to the task. Otherwise, the task is read-only.
- Each task has between two and four tabs. All tabs have the <u>Probes/CE</u> and <u>Use/Instructions</u> tabs. Some tasks have <u>Residents</u> and <u>Drawing Tool</u> tabs.
- The **Medication Administration** task has special callouts. Refer to the <u>Medication Administration</u> step for further details.
- Each task has a View Pathway PDF link. Some tasks have a View Intakes
 [Complaint] link. See Figure 156, Task Tab Intakes and Pathway Links. Click to
 view active intakes or the Pathway PDF.

Note: View Intakes only displays when a task is linked to an intake in Offsite Prep.



Figure 156: Task Tab Intakes and Pathway Link

21.9 Facility Task Notes

Purpose: To document notes for each facility task during the survey.

General Notes

- Facility Task Notes are not the same as Surveyor Notes and are in addition to Surveyor Notes. Refer to <u>Surveyor Notes</u> in this document for further details on those notes.
- Any survey team member assigned to the task can add, edit, delete, or view a Facility Note.

Navigate to Facility Task Notes

- Facility Task Notes can only be accessed and viewed within the specific Facility Task.
- Click the Notes icon on the top right of the screen to open all Notes. The icon is located directly under the user name. See *Figure 157, Notes Icon*.



Figure 157: Notes Icon

• Facility Notes open in combination with Resident Initial Pool and Surveyor Notes. Click on any tab to leave a note for that specific area. See *Figure 158, Facility Notes View.*

Notes:

- The note area that is in use has a white background.
- Initial Pool Notes are only available for Facility Tasks that have linked Care Areas.



Figure 158: Facility Notes View

• The Facility Notes default to opening on the right. Click the Facility Notes bottom menu icon to open the Facility Notes on the bottom of the page. See *Figure 159, Facility Notes Bottom Screen Icon.*



Figure 159: Facility Notes Bottom Screen Icon

- Facility Notes can be resized on the screen by dragging the left line (when the notes are on the left) or the top line (when the notes are on the bottom) of the Facility Notes panel. Hover over line until the directional arrows are shown, then drag the line in either direction.
- Notes can be left open while navigating to other LTCSP screens.

Create a Facility Note

- Click in the Facility Notes text area to create a note.
- A date/time stamp is automatically inserted when the surveyor starts to type in the text area when the text area is blank. Click Date/Time Stamp icon to insert date for additional notes.
- Type notes. See *Figure 160, Sample Facility Note.*
 - **Note**: The notes below are stacked. Drag the window to the left to unstack the notes. They will then be aligned horizontally

Sufficient and Competent Nurse Staffing Notes				
Resident Initial Pool Notes Surveyor Notes				
è º ≗ ♡ ≭ ī	б ∂ В <i>I</i> ⊻	<u>~</u> ~ …		
08/21/2024 2:41 PM Spent one hour in the facility without encountering one nurse. Only CNAs were available.				

Figure 160: Sample Facility Note

- Facility Notes are autosaved.
- The Last saved date and time shows at the bottom of the Facility Notes. See *Figure 161, Facility Notes Last Saved Date and Time.*



Figure 161: Facility Notes Last Saved Date and Time

Custom Toolbar Functions

There are 4 custom toolbar options among the normal standard formatting options. See *Figure 162, Facility Notes Custom Toolbar Functions*.



Figure 162: Facility Notes Custom Toolbar Functions

From left to right they are:

- View All Facility Notes
- o Insert Date/Time Stamp
- o Insert Resident ID
- o Notes History

Note: Hover over the icon to see the name of the icon.

• View All Facility Notes

View all team member's Facility Notes. See *Figure 163, View All Facility Notes*. Click any name to view the Facility Note.



Figure 163: View All Facility Notes

Click My Notes to return to the user's Facility Notes.

• Insert Date/Time Stamp

Insert the current date/time at the cursor placement.

• Insert Resident ID

Select **Resident ID** to be inserted into the Facility Notes. Multiple residents can be selected.

• Notes History

View a history of all autosaved Facility Notes entries. If a previously saved entry is deleted in error, it can be accessed from the Facility Notes History and copied and pasted into the current Facility Notes.

• Help

There is also a help icon on the toolbar which can be accessed for additional information as well as keyboard shortcuts. See *Figure 164, Facility Notes Formatting Menu.*



Figure 164: Facility Notes Formatting Menu

Note: Click the horizontal ellipsis to view the second row of formatting options.

21.10 Probes/CE Tab

Purpose: To allow the task assignee to make compliance decisions about the facility and when the facility is not in compliance, select the related tag and severity level.

Notes:

- All tasks have the **Probes/CE** tab.
- All tasks have CE questions, but not all tasks have probe text.
- Team members assigned to this task can respond to the question. All other team members have read-only access.
- This probe tab shows **Dining Observation**. Each Facility Task may look slightly different.

Answer the questions. See Figure 165, Probes/CE Tab Example and Table 25, Probes/CE Tab Example Detailed Callout.

	Dining Observa	ation					
	Probes/CE	Residents 13	Use/Instructions	Drawing Tool		A View Con	nplaints 🔲 <u>View Pathway PDF</u>
4	/26 ANSWERED						
	^{foo} I	1			2 View All Surv	eyors @ 3 Expand All Probe	All Questions V
Q	uestion 5				6 In Compliance	,	7 Tag 🗸 🛛 🗸
	 Does staff distribute and service 	ve food under sanitary condi	tions?		No Yes	Level 2 🗸	0812
>	 Are residents receiving food 	that accommodates residen	t allergies, intolerances, and pref	erences?	No Yes		0806
>	 12. Does the facility serve meals appetizing temperature (e.g., pr 	s that conserve nutritive valu rovide a variety of textures, c	ue, flavor, and appearance, and a colors, seasonings, pureed foods	re palatable, attractive, and a not combined)?	safe and No Yes		0804
>	 15. Does the facility offer an apprendiction 	pealing option of similar nutr	itive value to residents who refu	se food being served?	No Yes		0806
>	25. Does the facility provide suf preparing and serving meals, in	fficient staff to safely and eff 1 the scheduled time frames'	ectively carry out the functions of ?	of the food and nutrition servic	ces, including No Yes		0802

Figure 165: Probes Tab Example

Table 25: Probes/CE Tab Example Detailed Callout

No.	Name	Description		
1	Search	Search questions in list to filter to questions with the search criteria.		
2	View All Surveyors	Check this box to view answers for other task assignees at the highest level of noncompliance. Probes/CE tab is read-only when viewing all surveyor answers.		
3	Expand All Probes	Select to view all probe text related to the Critical Element (CE) questions, where applicable, or to expand a CE question individually with the caret.		
4	Filter	Filter on All questions, Answered , and Unanswered questions.		
5	Question	Each CE question for the specific mandatory task.		
6	In Compliance?	 Allows task assignees to make compliance decisions for CE questions. When the response is No, a severity level drop-down menu opens. Select the severity level from 1 to 4. Level 1 No actual harm with potential for minimal harm Level 2 No actual harm with a potential for more than minimal harm that is not immediate jeopardy Level 3 Actual harm that is not immediate jeopardy Level 4 Immediate jeopardy to resident health or safety 		
7	Tag	Click the tag and the Regulation Text/Interpretive Guidance window pops up. Select Regulation or Interpretive Guidance tabs. See <i>Figure 166, Regulation</i> <i>Text Tag.</i>		
8	✓	A white check mark in a green circle is shown in the far right column when the question has been answered.		
9	Questions	Each question, when available, can be expanded to view details of the probe. Click the caret next to the probe to expand or click the checkbox next to Expand All Probes to expand all probes. See <i>Figure 167, Expand Question</i> .		



Figure 166: Regulation Text Tag



Figure 167: Expand Question

21.11 Residents Tab

Purpose:

Notes:

- The following tasks have the **Residents** tab:
 - Arbitration (triggered)
 - Beneficiary Notification
 - Dining Observation
 - Environment (triggered)
 - Infection Control
 - Personal Funds (triggered)
 - QAPI and QAA
 - Resident Assessment (triggered)
 - Resident Council
 - Sufficient and Competent Nurse Staffing
- The **Residents** tab in the figure below shows **Dining Observation**. Other Facility Tasks that have a **Residents** tab may look slightly different.
- The system automatically adds residents to Facility Tasks based on the following criteria:
 - Residents in the Initial Pool with Care Area FI
 - MDS Indicators of Weight Loss/Dehydration (Dining Observation only)
 - Intake for non-anonymous resident linked to the Facility Task
 - Residents in the Initial Pool with MDS Discrepancy with no concerns (Resident Assessment only)
 - Out of data MDS Assessment (Resident Assessment only)
 - F600 cited (QAPI and QAA only) for noncompliance with severity for Abuse or Neglect Investigative Areas
 - Residents cannot be removed from the task by a surveyor

Review dining information. See *Figure 168, Residents Tab Example* and *Table 26, Residents Tab Example Detailed Callout*.

← Dining Observation						
ProLas/CE Residents 11	Use/Instru	uctions	Drawing Tool		<u> </u>	[]] <u>View Pathway PDF</u>
There is no minimum resident requirement	nt for this task.					×
a Resident 🗧	b Notes	C Room ¢	d Admit Date 👙	e Originating Initial Pool Area	f Added By ≑	9
Dover, Eileen (9)	Ē	L-R-L	08/01/2024	Nutrition	NHCS_Singy	8
KENT, LEAH (2)	£	60787049	05/24/2024	Food	MDS, NHCS_Singy	ŧ
Legge, Peg (12) (A View Complaint)		F-1	07/17/2024			ŧ
MUELLER, AIMEE B. (1)		60787057	05/24/2024		MDS	÷
Nutt, Hazel (11) (A View FRI		N-8	04/01/2024			÷
OWEN, KHADJIA (7)		60787045	05/24/2024		MDS	÷

Figure 168: Residents Tab Example

Note: Click the arrow next to the Task name to return to the **Facility Tasks** page.

Table	26:	Residents	Tab	Example	Detailed	Callout

No.	Name	Description
а	Resident	The name of the resident with Initial Pool number
b	Notes	A notes icon is shown when notes are available. It is possible to view the specific facility task notes, the resident initial pool notes and the surveyor notes. Click icon to view notes.
С	Room	Resident room number
d	Admit Date	Resident admittance date
е	Originating Initial Pool Area	The care area linked to the task where the resident was marked for FI or MDS discrepancy.
		• Added By is the [Surveyor] who marked the resident FI when marked FI for a linked Care Area.
f	Added By	• Added By is MDS when the resident is added for MDS data.
		• Added By is Initiated by [Surveyor] when the resident was manually added to the task.
σ	Trashcan	Only manually-added residents can be removed.
5		See <u>Remove Residents from a Task</u> for more details.
h	Intake tag	An intake tag with a clickable link is shown next to a resident when an intake is associated with that resident.

21.12 Add Residents to a Task

Purpose: To manually add a resident to a facility task.

- The Add Residents for Task button is not used to add a resident to a facility or survey.
- When a resident is added to a specific task, it is valid for that task only.
- Any survey team member can add a resident to a task.
- The Add Residents for Task button can be viewed in:
 - Survey Prep (Offsite Prep, Entrance Conference, Team Meeting)
 - Initial Pool (Resident Manager, Closed Record Sample, Finalize Sample)
 - Investigation (Facility Tasks, Investigations, Potential Citations).
 - 21.12.1 Click the **Add Residents for Task** icon on the top right of the screen. See *Figure 169, Add a Resident for Task Icon.* The **Add Residents for Task** window opens. See *Figure 170, Add Residents for Task* and *Table 27, Add Residents for Task Detailed Callout.*
 - **Note**: It is located directly under the user name and next to the <u>Surveyor Notes</u> icon.



Figure 169: Add a Resident for Task Icon
21.12.2 Select the Facility Task from the drop-down menu next to Add **Residents to** field.

Notes:

- More than one Facility Task can be selected.
- The Survey Team Member who manually adds the resident is automatically added as a task assignee.

Add Residents for Ta	isk			×
Add Residents to Dining Obser	vation			~
Q Search Residents	b	C Filter	All Residents	~
d Resident 🗧		Room 🛓		
Booke, Rita (15)		B-52		
Clyde, Bonnie-Ann (14)		BC-12		
Dahl, Barb E. (16)		B-222		
Dover, Eileen (9)		L-R-L		
KENT, LEAH (2)		60787049		
Legge, Peg (12)		F-1		
MUELLER, AIMEE B. (1)		60787057		
Nutt, Hazel (11)		N-8		
OWEN, KHADJIA (7)		60787045		
PENA, AMY (8)		60787046		
+ Add New Resident e			Cancel	dd

Figure 170: Add Residents for Task

Table 27: Add Residents	for Task Detailed Callout
-------------------------	---------------------------

No.	Description				
	Add a Resident to one or more Facility Tasks. Select from the drop- down menu.				
а	Note : It is not necessary to select the specific task when adding a resident when the facility task is open. The facility task is automatically shown.				
b	Search residents in list by name, room number, resident ID.				
С	Filter on All Residents or only selected residents.				
d	Check the box next to each resident to be added. More than one resident can be added at once.				
е	Add a new resident, if necessary. Once the new resident is added, it is possible to select them from the resident list to add to a Facility Task.				
	Click Add [number] to set the facility task for each resident. Otherwise, click Cancel .				
f	Note: Add is grayed out until a resident is selected. The number to be added is updated when the resident is selected. For example, if five residents are selected, Add reads Add 5.				

21.12.3 Verify the green notification banner indicates the resident or residents were added successfully. See *Figure 171, Facility Task Residents Created Successfully*.





Note: When no residents or an insufficient number of residents are on the task, the **Resident** tab shows the following:

• There are no residents added to this task. See *Figure 172, There Are No Residents Added to Task.* Click + Add Residents to add residents and follow instructions in this step.

Home / Waters Edge Nursin	Home / Waters Edge Nursing Home / Survey 1490FF-H1					
Infection Co	ntrol					
Probes/CE	Residents 0/8	Use/Instructions	[]] <u>View Pathway</u>	PDF		
	There are r	no residents	added to this task.	٦		
You must add a	You must add a minimum of 5 residents for immunization and 3 residents for infection prevention and control to complete this task. Get started by adding residents below.					
+ Add Residents						

Figure 172: There Are No Residents Added to Task

• You haven't met your resident minimum of [number] residents yet notification banner. See *Figure 173, You haven't met your resident minimum of residents Notification.* Follow the step <u>Add Residents to a</u> <u>Task</u> to add the necessary minimum of residents.



Figure 173: You haven't met your resident minimum of residents Notification

21.13 Remove Residents from a Task

Purpose: To remove a resident from a specific task.

Notes:

- Only manually-added residents can be removed from a task.
- When a resident is removed from a specific task, it is valid for that task only.
- Any Survey Team Member with edit access to the task can remove manuallyadded residents from a task.
 - 21.13.1 Click the trashcan icon to the right of the resident name. See *Figure 174, Remove a Resident.* A **Yes, Remove** pop-up window opens.
 - **Note**: The trashcan must be red to be active. Grayed out trashcans mean the resident has either been system-added, or another user added the resident.

Resident 🛊	Notes	Room 🝦	Admit Date 🝦	Originating Initial Pool Area	Added By 💠
Able, Eve (19)		108	09/29/2023	Food, Nutrition	CS0zias (98054)
Adams, Jane L. (29)		105	10/04/2023		Initiated by impl_Singy_Contract_Surveyor
Anderson, Nancy A. (8)	=	100		Food	MDS, CS0zias (98054)

Figure 174: Remove a Resident

21.13.2 Verify the correct resident is being removed. See *Figure 175, Yes, Remove*.



Figure 175: Yes, Remove

21.13.3 Click Yes, Remove.

21.13.4 Verify green notification banner appears. See *Figure 176, Resident Successfully Removed from Task.*

Adams, Jane L. (29) was successfully removed from the Dining Observation Task.

Figure 176: Resident Successfully Removed from Task

21.14 Use/Instructions Tab

Purpose:

Notes:

- All tasks have the **Use/Instructions** tab.
- This **Use/Instructions** tab shows **Beneficiary Notification**. Each Facility Task may look slightly different.
- Some **Use/Instructions** tabs may have links to additional documentation. Those links are on the top right menu.

Note: Use/Instructions default to open.

- 21.14.1 Click **Use/Instructions** tab to view the use and instructions for the facility task.
- 21.14.2 Click the caret next to **Use** to view the use text. Click the caret next to **Instructions** to view the instructions. See *Figure 177, Use/Instructions*.

Beneficiary N	Beneficiary Notification								
Probes/CE	Residents 0/3	Use/Instructions	[]] <u>View Pathway PDF</u>						
Vuse									
Beneficiary Notification Review: Complete the review for residents who received Medicare Part A Services. Medicare beneficiaries have specific rights and protections related to financial liability and the right to appeal a denial of Medicare services under the Medicare Program. These financial liability and appeal rights and protections are communicated to beneficiaries through notices given by providers. This protocol is intended to evaluate a nursing home's compliance with the requirements to notify Medicare beneficiaries when the provider determines that Medicare Part A sources may no longer be covered. This review confirms that residents receive timely and specific notification when a facility determines that Medicare Part A sources may no longer be covered. This review confirms that resident provider determines that Medicare Part A sources may no longer be covered. This review confirms that resident pard and specific notifications. The two forms of notifications that are evaluated in this review are: 1. Skilled Nursing Facility Advance Beneficiary Notice of Non-coverage (SNF ABN)–Form CMS-10055, and 2. Notice of Medicare Non-coverage (NOMNC)–Form CMS 10123.									
V Instructions									
Entrance Conference Works	sheet: The following information	was requested during the E	strance Conference:						
 A list of Medicare benefic following residents from 	ciaries who were discharged from this review:	a Medicare covered Part A s	tay with benefit days remaining in the past 6 months prior to the survey. Exclude the						
 Beneficiaries who re 	eceived Medicare Part B benefits	only.							
Beneficiaries covered under Medicare Advantage insurance.									
 Beneficiaries who es 	Beneficiaries who expired during the sample date range.								
 Beneficiaries who w 	vere transferred to an acute care	facility or another SNF.							

Figure 177: Use/Instructions

21.15 Drawing Tool Tab

Purpose: To create a drawing detailing an issue.

Notes:

- The **Dining** and **Kitchen** Facility Tasks have the **Drawing Tool** tab.
- Only task assignees can use the drawing tool. All team members can view the drawing.
- Drawing pages can have multiple pages.
- The drawing is automatically saved.
 - 21.15.1 Click the **Drawing Tool** tab to create a drawing for the facility task.
 - 21.15.2 Click the pencil icon (a) to start drawing. See Figure 178, Drawing Tool Tab Example and Table 28, Drawing Tool Tab Example Detailed Callout.

Dining Obser	vation			
Probes/CE	Residents 20	Use/Instructions	Drawing Tool	\land <u>View Intakes</u> 🔟 <u>View Pathway PDF</u>
< Page1of1 >		f 4+++ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	banana	a b c d c

Figure 178: Drawing Tool Tab Example

No.	Name	Description
а	Pencil icon	Click to start drawing.
b	Eraser icon	Click to erase parts of the drawing.
с	Undo/Redo icons	Click to undo the most recent action or to redo an action that was undone.
d	Trashcan icon	Click trashcan to remove all pages of the drawing. A pop-up window verifies removal.
е	Other Drawings	View all surveyor drawings. See Figure 179, All Surveyor Drawings.
f	Blank space	Draw in the blank space.
g	Pages	Click the single arrow to create a new drawing page or to review multiple pages of drawings.

Table 28: Drawing Tool Tab Example Detailed Callout



Figure 179: All Surveyor Drawings

21.16 Medication Administration

Purpose: To document a minimum of 25 medication observations and determine facility compliance for the task

Notes:

- The Medication Administration Facility Task is called out because it has additional information not found on other tasks, including the **Observation** Tab.
- Refer to <u>Probes/CE Tab</u> and <u>Use/Instructions Tab</u> for information on these tabs.

Open Observations Tab in Medication Administration

Add or Edit a Medication Observation

Delete a Medication Observation

Delete a Medication

Filter Observations

Mark a Medication Observation Complete

Add Medication Observation Notes

Insert Error Text

Copy Medication Observation Notes to Facility Tasks Notes

Open Medication Observations Tab in Medication Administration

a. Open the **Medication Administration** Facility Task. See *Figure 180, Medication Administration Facility Task*. The task opens on the **Probes/CE** tab.

Medication A	dministration					
Probes/CE	Observations 0/25	Use/Instructions				[]] <u>View Pathway PDF</u>
0/6 ANSWERED						
Search Probes / CE			View All S	urveyors 🕜	Expand All Probes	Filter All Questions V
Question				In Compliance?		Tag 🗸
1. Does the facility ensure t If more than one surveyor o and that the TC shares bac and errors will be displayed	hat it is free of medication error rate completes the task, be sure each park k to the surveyor primarily responsit under the "All Surveyors" tab.	s of five percent or greater? ticipating surveyor shares their le for this task. The total numbe	data with the TC r of opportunities	Yes No		<u>F0759</u>
ightarrow 2. Does the facility ensure t	that residents are free of any signific	ant medication errors?		Yes No		<u>F0760</u>
3. Did the facility provide m resident?	3. Did the facility provide medications and/or biologicals and pharmaceutical services to meet the needs of the resident? Yes No					F0755
4. Did the facility appropria professional principles?	tely label and store drugs and biolog	icals in accordance with current	ly accepted	Yes No		<u>F0761</u>
5. Did the facility implemen administration including hat	t appropriate infection prevention a Ind hygiene, injection safety and po	nd control practices during med nt-of-care testing?	ication	Yes No		<u>F0880</u>
> 6. Did the facility meet prof	essional standards of quality? Note:	If F658 is cited, an associated t	ag should be cited.	Yes No		<u>F0658</u>

Figure 180: Medication Administration Facility Task

b. Click the **Observations** tab to view text. See *Figure 181, Medication Administration Observation Tab*.

Medication Administration			
Probes/CE Observations 0/25	Use/Instructions		[[]] <u>View Pathway PDF</u>
O Total Number of Errors	O Opportunities for Errors	0% My Error Rate	0% Total Error Rate
Filter All Observations ~			+ Add Observation
CSOzias (98054) 🕲 03/19/2024 2:26 PM			🖲 Delete 📝 Add Notes
RESIDENT Adams, Jane L. (29)	STAFF John Smith		
		ROUTE	QUANTITY 2
FREQUENCY		CRUSHED REFUSED EXCLUDE ERROR	
ORIGINAL ORDER		ERROR REASON	COMPLETED
+ ADD ANOTHER MEDICATION			

Figure 181: Medication Administration Observation Tab

Add/Edit a Medication Observation

Notes:

- Any surveyor assigned to the task can add Medication Observations and edit their own observations.
- The **Medication Administration** task requires a minimum of 25 Medication Observations
- a. Click + Add Observation to add a new Medication Observation. See *Figure 182, Add Medication Observation.* The fields clear.



Figure 182: Add Medication Observation

b. Fill out information. See *Figure 183, Add a Medication Observation* and *Table 29, Medication Observations Detailed Callout.*

Notes:

- Select from a list or type custom information in the **Medication**, **Route**, and **Frequency** fields.
- Medication Observations are automatically saved but are not complete until specific areas are completed. See <u>Mark a Medication Observation</u> <u>Complete</u>.
- Medication Observations increase for each added observation. The error and error rate update as well. See *Figure 184, Medication Observation Updated Counts.*
- c. Check **Completed** when information is complete. See <u>Mark a Medication</u> <u>Observation Complete</u>..

Note: The Completed field is grayed out until required fields are filled out.

Medication Administration						
Probes/CE Obs	ervation: 2/25	Use/Instructions		III <u>View Pathway PDF</u>		
8 Your team hasn't met the go	Vour team hasn't met the goal of 25 observations yet.					
1 Total Number of Errors	Opportuni	2 ties for Errors	50% My Error Rate	50% Total Error Rate		

Figure 183: Medication Observation Updated Counts

	NHCS_Singy (3) 08/21/2024 11:42 AM	
	RESIDENT	STAFF
	MEDICATION 1	
Q	ROUTE	QUANTITY g
0	FREQUENCY	
	CRUSHED REFUSED EXCLUDE ERROR COMPLETED	
0		
Ø	+ ADD ANOTHER MEDICATION	

Figure 184: Add a Medication Observation

Table 29: Medication Observations Detailed Callout

No.	Name	Description
а	Date/Time	The observation is date and time stamped.
b	RESIDENT	Select the resident from the drop-down menu.
с	STAFF	Type the staff name of the person giving the medication.
		Click the trashcan to delete the medication.
d	TRASH CAN ICON	Note : Only the TC or the surveyor who entered the medication can delete the medication.
	MEDICATION	Filters for standard medications and dosages.
е		Start typing the name of the medication. A list automatically appears with suggestions for the
	юкир	medication or type a custom medication in the blank field.
f	ROUTE	Select how the medication was administered or type a custom dose in the blank field.
g	QUANTITY	Type in number of medications given in blank field.
h	FREQUENCY	Select the frequency the medication was administered or type a custom value in the blank field.

No.	Name	Description		
i	How medication was delivered	Click the checkbox next to how the medication was delivered. Notes:		
		 Refused checkbox notes when a resident refuses the medication. Exclude checkbox does not count the observation or include it in the error calculation (For example, supplement, vitamin). Error checkbox when there is an error observed with the medication observation. Original Order field only displays when Error is selected. 		
j	+ ADD ANOTHER MEDICATION	Click to add an additional medication. Note : The additional medication must be for the same resident and staff member.		

Mark a Medication Observation Complete

 Medication Observations are completed when Resident, Staff, and Medication fields have values. See *Figure 185, Mark Observation as Completed*. The Completed field is grayed out until these three fields are updated.

CRUSHED	REFUSED	EXCLUDE	ERROR	COMPLETED	
				×	

Figure 185: Mark Observation as Completed

• The total observation count and percentages calculated at the top of the screen update once a Medication Observation is marked as complete. See *Figure 186, Medication Observation Percentages and Count.*

Probe	es/CE	Observations 2/25	Use/Instructions III View Pathway		
		<u> </u>			
	O Total Number	of Errors	2 Opportunities for Errors	0% My Error Rate	0% Total Error Rate

Figure 186: Medication Observation Percentages and Count

Delete a Medication Observation

Notes:

- Surveyors can only delete medication observations when they are the assigned surveyor.
- All associated medications and observation notes are deleted when a medication observation is deleted.
 - a. Click **Delete** to delete Medication Observation. See *Figure 187, Delete Medication Observation.* The **Delete Observation** pop-up window opens.

ţ	+ Add Observation
🗓 Del	ete 🖍 Add Notes

Figure 187: Delete Observation

b. Click **Yes, Delete** to delete Medication Observation. See *Figure 188, Delete Observation.*



Figure 188: Delete Observation

Delete a Medication

Click the trashcan to delete the medication. See Figure 189, Delete a Medication.

Note: Only the surveyor who entered the medication can delete the medication.

MEDICATION
alanine 11 MG/ML / arginine 8.5 MG/I
FREQUENCY

Figure 189: Delete a Medication

Filter Medication Observations

Click the drop-down menu next to **Filter** to filter Medication Observations. See *Figure 190, Filter Medication Observations.*

Note: Medication Observations can be filtered by:

- All Observations
- Errored Observations
- My Observations.



Figure 190: Filter Medication Observations

Add Medication Observation Notes

Notes:

- Medication Observation Notes can only be added for the surveyor's own observations.
- Medication Observation Notes are different from Facility Task Notes.
- Medication Observation Notes remain with the medication observation and do not move forward into **Potential Citations** unless they are copied into Facility Task Notes, and the task is cited for noncompliance.
 - a. Click **Add Notes** to add Medication Observation Notes. See *Figure 191, Add Medication Observation Notes*. The **Notes** page slides open to the right. The observation remains visible on the left.



Figure 191: Add Medication Observation Notes

b. Type notes. See Figure 192, Medication Observation Notes.

Note: The notes automatically save.



Figure 192: Medication Observation Notes

c. Click **Close Notes** to close the notes. The notes toggle to **Edit Notes**.

Custom Toolbar Functions for Medication Observation Notes

The Medication Observation Notes toolbar has four custom functions that are explained below. See *Figure 193, Medication Observation Notes Custom Toolbar.*

- Insert Date/Time
- Insert Resident ID
- Insert Error Text
- Copy to Facility Task Notes



Figure 193: Medication Observation Notes Custom Toolbar

Insert Date/Time (a)

Insert the current date/time at the cursor placement.

Insert Resident ID (a)

Select **Resident ID** to insert resident ID into the Medication Observation.

Insert Error Text

Click the Insert Error Text icon to insert error text into medication observation notes. The text inserts automatically. See *Figure 194, Insert Error Text into Observation Notes*.



Figure 194: Insert Error Text into Observation Notes

Copy Medication Observation Notes to Facility Tasks Notes

a. Click the Copy to Facility Tasks icon to copy all the medication observation notes into the facility task notes. See *Figure 195, Copy to Facility Tasks*.



Figure 195: Copy to Facility Tasks

b. The medication observation notes are automatically copied into the facility task notes. There is no need to do anything. See *Figure 196, Medication Observation Notes Automatically Copied to Facility Task Notes.*



Figure 196: Medication Observation Notes Automatically Copied to Facility Task Notes

22. Investigations

Purpose: To investigate the following:

- Residents included in the final sample
- Residents included in the final closed record sample
- Residents selected as unnecessary meds candidates
- Any investigations created by a surveyor or created due to a linked intake in Offsite Prep

Note: Survey team members can assign themselves to an investigation.

22.1 Investigations Overview

Click **Investigations** on the left menu on the drop-down left menu under **Investigation**. The **Investigations** window opens to the **My Investigations** tab. See *Figure 197, Investigations* and *Table 30, Investigations Detailed Callout*.

Survey 1DF843-H1 Marion Manor NH CCN 015651 Nursing Home SPECIAL FOCUS STATUS	Investigations a b All Investigations 35 My Investigation	15 25	C + Add New Investigations
Active Basic Information Teams	Group Investigations By Resident	d h i j k Admit & Room & BIMS & Assigned To	Hide Completed Investigations Hide Completed Investigations Potential Inv.Reason Citations
LTCSP Survey Prep ~ Initial Pool ~	Booke, Rita (15) Care Planning	10/01/2024 B-52 NHCS_Singy ~	Initiated by NHCS_Singy -
Investigation ^ Assignments FacilityTasks	Civde.Bonnie- Ann.(14) Abuse Accidents	10/01/2024 BC-12 NHCS_Singy ~	Abuse - 😫
Investigations Potential Citations Resources	Advance Directives	NHCS_Singy ~	Advance Directives - 😫
Citations	O <u>Diatysis</u>	NHCS_Singy ~	Dialysis - 😫
Statement of Deficiencies	O <u>Nutrition</u>	NHCS_Singy ~	Dialysis - 🔒
्रिः CMS-671 Notes	Physical Restraints Unnecessary Meds, Psychotropic Meds, and Med	NH_Singy_Contract_Surveyor, NHC_ ~	Initiated by NHUS_Singy PU804
Attachments	Regimen Review		Medications Review

Figure 197: Investigations

Table 30: Investigations Detailed Callout

No.	Name	Description
а	All Investigations	Investigations with no assignee or those assigned to other survey team members
b	My Investigations	Defaults to My Investigations tab. Shows the user's investigations.
с	Add New Investigations	Click to add a new investigation. See <u>Add New</u> <u>Investigations.</u>
d	Group Investigations By	Select Resident or Investigative Area . The selection then shows either the Resident or the Investigative Area in the first column.
е	Hide Completed Investigations	Check this box to hide all completed investigations
f	Resident	Name of the resident and their ID. Click the resident's name to find out further details and make compliance decisions.
g	Investigative Area	The area of investigation for the resident. Click the link to make compliance decisions for that area.
h	Admit Date	Resident admittance date
i	Room	Resident room number
j	BIMS	The Brief Interview for Mental Status score
k	Assigned To	Surveyor assigned to an investigation. More than one surveyor can be assigned to an investigation. A surveyor cannot be unassigned from an investigation when there is associated data with the investigation.

No.	Name	Description	
I	Inv Reason	How the investigation (Inv) was created.	
m	Potential Citations	ntial Citations Potential Citations are shown. Tags are displayed in bold text if cited by the surveyor.	
		Only the TC or the assignee (when they are the only assignee) can remove an investigation and only investigations with no data can be removed.	
n	Remove	Click the trashcan. The Enter Investigation Removal Rationale pop-up window opens.	
		Fill out Rationale and Description.	
		Click Save . The investigation is removed.	

22.2 Add New Investigations

22.2.1 Click + Add New Investigations to add a new investigation. The Add New Investigation pop-up window opens. See Figure 198, Add New Investigation Pop-Up Window.

Add New Investigation	×
Please select a Resident \overline{J}_{nd} any Investigation Areas you would like to initiate. select the FTag Initiation Investigation Area.	To directly cite a tag,
Resident *	
Select Resident	\sim
Investigation *	
Select Investigation Area	~
с	ancel Save

Figure 198: Add New Investigation Pop-Up Window

- 22.2.2 Select **Resident** from the drop-down menu.
- 22.2.3 Select Investigation Area from the drop-down menu.
- 22.2.4 Click **Save**. The investigation information populates for the resident under **Investigative Area**. See *Figure 199, Resident Investigation Information*.



Figure 199: Resident Investigation Information

22.2.5 Verify the green notification banner indicates the new investigation has been successfully added. See *Figure 200, New Investigation Green Notification Banner.*



Figure 200: New Investigation Green Notification Banner

22.3 Remove an Investigation

Notes:

- The TC can remove any investigation.
- Survey team members can remove an investigation that does not have associated data where they are the only assignee.
 - 22.3.1 Click the trashcan icon next to the investigation. See *Figure 201, Investigation Trashcan Icon.* The **Remove Investigation** pop-up window opens.

NHCS_Singy	~	Initiated by NHCS_Singy	-	ê
NHCS_Singy	~	Initiated by NHCS_Singy	-	

Figure 201: Investigation Trashcan Icon

22.3.2 Type a rationale in the **Rationale** field. See *Figure 202, Remove Investigation Rationale.*

Remove Investigation >	<
Please indicate the rationale for removing the Advance Directives investigation for Makit, Willie (26).	
Rationale *	
The resident's advance directives were found in his drawer.	4
<u>Cancel</u> Save	

Figure 202: Remove Investigation Rationale

- 22.3.3 Click **Save**.
- 22.3.4 Verify the **Investigation deleted successfully** green notification banner is shown. See *Figure 203, Investigation Deleted Successfully Green Notification Banner.*



Figure 203: Investigation Deleted Successfully Green Notification Banner

22.4 Open an Investigation

Note: When a surveyor is assigned to the investigation, the investigation is editable. Otherwise, the investigation is read-only.

Click the name of the resident to open the investigation details. See *Figure 204, Resident Investigation Details Landing Page* Review each of the tabs below.

Notes:

• Select either the resident or the investigative area. See Figure 205, Group Investigations by Resident and Figure 206, Group Investigations by Investigation.

Investigations					
				+ Add New Inves	stigations
All Investigations 35 My Investigations	s (25)				
Group Investigations By Resident ~				Hide Completed	d Investigations
Resident 🗧 Investigative Area	Admit Date [↓] Room ↓ BIMS ↓	Assigned To	Inv. Reason	Potential Citations	
Booke, Rita (15) O Care Planning	10/01/2024 B-52	NHCS_Singy ~	Initiated by NHCS_Singy		
Civde, Bonnie- Ann (14) O Abuse	10/01/2024 BC-12	NHCS_Singy ~	Abuse	-	a
C Accidents		NHCS_Singy ~	Initiated by NHCS_Singy	-	•
Advance Directives		NHCS_Singy ~	Advance Directives	-	8

Figure 204: Group Investigations by Resident

Investigations									
								+ Add New Invest	igations
All Investigations 35	My Investigations	25							
Group Investigations By	Investigative Area 🛛 🗸							Hide Completed	Investigations
Investigative Area 🝦	Resident	Admit Date	Room	BIMS	Assigned To		Inv. Reason	Potential Citations	
Abuse	ා <u>Clyde, Bonnie-</u> <u>Ann (14)</u>	10/01/202 4	BC-12		NHCS_Singy	~	Abuse		8
	े <u>KENT, LEAH (2</u>)	05/24/202 4	6078704 9	13	NHCS_Singy	~	Abuse	-	•
	े <u>Legge, Peg</u> (12)	07/17/202 4	F-1		NHCS_Singy	~		<u>F0600, F0606</u> , <u>F0607</u>	ŧ
Accidents	ා <u>Clyde, Bonnie-</u> <u>Ann (14)</u>	10/01/202 4	BC-12		NHCS_Singy	~	Initiated by NHCS_Singy	-	8

Figure 205: Group Investigations by Investigation

• Click the arrow next to the resident's name to return to the **Investigations** page.



Figure 206: Resident Investigation Details Landing Page

22.5 MDS Information

- **Note:** The MDS information can be accessed on the following three LTCSP pages when there is data on the MDS assessment. This section shows access from **Investigations** grouped by resident.
 - Resident Manager specific resident
 - Investigations (grouped by resident) specific resident
 - <u>Investigations</u> (grouped by area) specific area with specific resident selected
 - 22.5.1 Click the resident name on the **Investigations** page. The **Investigations** resident page opens. See *Figure 207, Investigations Resident Page.*

← SII	\leftarrow SIMMONS, ANA (6)								
Room 60787044	Admit Date 05/24/24	BIMS 13	MDS Indicators Dialysis, Hosp w/Dx <u>(+4 mor</u>	ice, No PASARR II <u>e)</u>					
∆ <u>View Int</u>	akes 🖸 MDS A	ssessment	[]] <u>View Pathw</u>	ay PDF					
Use/Instruct	tions/Probes	Critica	l Elements	Investigations	Drawing Tool				

Figure 207: Investigations Resident Page

22.5.2 Click **MDS Assessment**. The resident **Patient Information** and **Assessments** page opens in a different tab.

Notes:

- Investigations: The MDS Assessment link, when available, is located under the resident's name on the Investigations Resident page.
- **Resident Manager**: The **MDS Assessment** link, when available, is located to the right of the tabs on the **Resident Manager Resident** page. See *Figure 208, Resident Manager MDS Link.*

←	Y	SIMM	ION	s, ana (6) 🛛 💼							anager
Room 6078	⊿ 7044 0	Admit Date 05/24/24	BIMS 13	MDS Indicators Dialysis, Hospice, No PASARR	Interview Status	terview	RI Contact	Include in	sample due to	Weight Calc	
				ll w/Dx (<u>+4 more)</u>							
	Intervi	ew 🤡		Observation	Record Review	Ľ	MDS Asse	ssment	<u>View Intak</u>	<u>es</u>	Completed

Figure 208: Resident Manager MDS Link

View an MDS Assessment

Save/Print an MDS Assessment

View an MDS Assessment

a. Click **View** to view the assessment. See *Figure 209, Resident Patient Information and Assessments*. The **Assessments** page opens in a different tab.

Home / Create/Manage Assessments / A	NA SIMMONS			102 Test Brouider	
ANA SIMMONS				Test, AL 41232	
Detient lefensetien					
Patient Information					
Social Security Number	Date of	Birth		Medicare ID	
Medicaid ID	Condor				
No information	male				
Assessments					
1 Assessment					
Type Created By	Admission Date	HIPPS Code	State	Status 🗘	Actions
Comprehensive Pat test.tong.so	05/24/2024	JDAA1	Original	Accepted 07/12/2024 2:15 PM UTC	View Print

Figure 209: Resident Patient Information and Assessments

b. Click each *section* on the left menu to view information about that section. See *Figure 210, Assessment Information.*

Notes:

- The assessment acceptance date is noted in the green notification banner.
- It may be necessary to scroll to view all the information in the section.
- Section A is shown.

< Return to Patient	> Print
This assessment was accepted on 0	7/12/2024 UTC
Section A Identification Information	Section A: Identification Information
Section B Hearing, Speech, and Vision	A0100. Facility Provider Numbers National Provider Identifier (NPI) (A0100A)
Section C Cognitive Patterns	Λ
Section D Mood	CMS Certification Number (CCN) (A0100B) 015651
Section E Behavior	State Provider Number (A0100C)
Section F Preferences for Customary Routine and Activities	
Section GG Functional Abilities and Goals	Type of provider (A0200) 1 - Nursing home (SNF/NF)
Section H Bladder and Bowel	A0310. Type of Assessment
Section I Active Diagnoses	Of - Admission assessment (required by day 14)
Section J Health Conditions	PPS Assessment (A0310B) 01 - 5-day scheduled assessment
Section K Swallowing/Nutritional Status	Is this assessment the first assessment (OBRA, Scheduled PPS, or Discharge) since the most recent admission/entry or reentry? (A0310E)
Section L Oral/Dental Status	^{0-No} Some sections may require scrolling to view all information

Figure 210: Assessment Information

c. Click **Return to Patient** to return to the resident information or <u>Print</u>, to view a printable version of the assessment.

Save/Print a Complete MDS Assessment

a. Click **Print** on the assessment page or on the resident page. See *Figure 211, Print*. A printable version of the assessment opens.

Assessmei	nts					
1 Assessment						
Туре	Created By	Admission Date	HIPPS Code	State	Status 🗘	Actions
Comprehensive	Pat test.tong.so	05/24/2024	JDAA1	Original	Accepted 07/12/2024 2:15 PM UTC	View Print

Figure 211: Print

Note: The printable assessment is very large. Scroll to view it in its entirety, if desired. The **Top** button is shown on the bottom right of the screen during scrolling. Click **Top** to go to the top of the assessment. See *Figure 212, Top Button.*



Figure 212: Top Button

b. Click the vertical ellipsis (hamburger or three dots) at the top right of the screen. A drop-down menu opens.

Note: Browsers look different. Be sure to review the figure for the appropriate browser.

Chrome See Figure 213, Chrome Vertical Ellipsis Options Menu

Microsoft Edge See Figure 214, Edge Horizontal Options Menu

Note: The options menu is a vertical ellipsis in Chrome. The options menu is three horizontal lines Edge.
	0- Q	☆ 🛊	
New Tab			ЖТ
New Window		-	ЖN
New Incognito Window	v		ĠЖN
History			•
Downloads			τæι
Bookmarks			•
Zoom	-	67% +	:3
Print			ЖР
Cast			
Find			ЖF
More Tools			•
Edit	Cut	Сору	Paste
Settings			æ,
Help			•

Figure 213: Chrome Vertical Ellipsis Options Menu



Figure 214: Edge Horizontal Options Menu

- c. Select Print. The Print menu opens.
- d. Select **Save as PDF** from the drop-down menu next to **Destination**. *See Figure 215, Print Menu*.

Note: Save as PDF is usually the default choice.

NUME Status Category Writing in progress Recertification	1983 Root - Kerope View Rock Melensian Starts Datas Alto Information		Print		1 page
Basic Information Responsible Staff Teams	Basic Information Survey Type Enforcement Case ID	Haalth 227559-E	Destination	Save as PDF	•
Citations Statement of Deficiencies Informal Dispute Resolution	Survey Categories Federal Categories State Categories	Recentification No information	Pages	All	•
045-1572 045-570 045-570	Survey Extents Survey Extents	Albreviated Estended	Pages per sheet	1	Ŧ
Nones Attachments	Regulation Sets Federal Regulation Sets State Regulation Sets	HOME HEALTH AGENCIES (FED - G - T1.00) No information	Margins	Default	Ŧ
	Survey Status Survey Status Start Date	Open Na Information	Options	 Headers and footer Background graphic 	rs cs
			Print using system dial	og (\\#P)	Z
https://audi.igius.http://augiptessikes/2000/96.auvept=707114		и	Open PDF in Preview		Ø
				Cancel	Save

Figure 215: Print Menu

Note: The figure above is a Google Chrome print menu. Other print menus may look slightly different.

e. Click **Save**. The **Save As** popup window opens. *See Figure 216, Save As Popup Window.*

🔟 Save As								×
$\leftarrow \rightarrow \checkmark \uparrow$	Surveyor Sue> Desktop				~ C	Search	Desktop	Q
Organize 🔻 Ne	w folder						Ξ	i • 😗
	Name		Status	Date modified	Туре		Size	
🛄 Desktop	🖈 🖻 iQIES Learning		0	12/11/2024 3:19 PM	Microsoft Wo	ord D	18 KB	
↓ Downloads	* LTCSP Information		0	3/21/2024 2:34 PM	Microsoft Wo	ord D	16 KB	
Documents	*							
Pictures	*							
🕖 Music	*							
🔀 Videos	*							
TAC								
File name:	Assessments 03.13.25							~
type:	Adobe Acrobat Document				\			~
Authors:	Surveyor Sue	Tags: Add a tag	9	Title: Add	l a title			
	Save Thumbnail							
∧ Hide Folders					Tools 🔻	2	iave	Cancel

Figure 216: Save As Popup Window

- f. Select the destination folder on the left.
- g. Type the desired file name next to File name.
- h. Click Save.
- i. Open the .pdf from the destination folder selected.

Save/Print a Single Section of an MDS Assessment

a. Click **View** on the assessment page or on the resident page. See *Figure 217, View.* The assessment sections opens.

Assessmer	nts					
1 Assessment						
Туре	Created By	Admission Date	HIPPS Code	State	Status ≑	Actions
Comprehensive	Pat test.tong.so	05/24/2024	JDAA1	Original	Accepted 07/12/2024 2:15 PM UTC	View Print

Figure 217: View

b. Select the section to be printed on the left menu. See *Figure 218, MDS Single Section Print.*

< Return to Patient	lue line shows which assessment is active.	Print
This assessment was accepted on 07/1	2/2024 UTC	×
Section A Identification Information	Section E: Behavior	
Section B Hearing, Speech, and Vision	E0100. Potential Indicators of Psychosis Hallucinations (perceptual experiences in the absence of real external sensory stimuli) (E0100A)	
Section C Cognitive Patterns	0 - Not checked (No)	
Section P Mode	Delusions (misconceptions or beliefs that are firmly held, contrary to reality) (E0100B) 0 - Not checked (No)	
Section E Behavior	None of the above (E0100Z) 1 - Checked (Yes)	
Section F Preferences for Customary Routine and Activities	Behavioral Symptoms	
Section GG Functional Abilities and Goals	E0200. Behavioral Symptom - Presence & Frequency	

Figure 218: MDS Single Section Print

c. Right click on the mouse. A pop-up window opens. See *Figure 219, Right Click Menu.*

Notes:

- Be sure to be in the middle of the desired section.
- Do not have any words highlighted.

Back
Forward
Reload
Save As
Print 🗲 🗕 🚽
Cast
Search with Google Lens
Open in Reading Mode
Send to Your Devices
Create QR Code for this Page
Translate to English
View Page Source
Inspect

Figure 219: Right Click Menu

- d. Select Print. The Print menu opens.
- e. Select **Save as PDF** from the drop-down menu next to **Destination**. *See Figure 220, Print Menu*.

Note: Save as PDF is usually the default choice.

1160, ILM AM AGENTIC Assesses. Yes forces			
Submission ID 1617486150	Drint		2 00000
	FILIT		- S pages
Batum to Patient Print			
This assessment was accepted on 07/12/2024 UTC X	Destination	Save as PDF	•
Juma to Section *			
Section E: Behavior	Pages	All	•
E0100. Potential Indicators of Psychosis			
Hallucinations (perceptual experiences in the absence of real external sensory stimuli) (09100A) 0 - Not dwoked (No)	Pages per she	et 1	•
Deluzions (misconceptions or beliefs that are firmly held, contrary to reality) (\$1108) 0 - Not chucked (No)			
None of the above (89102) 1 - Checkel (7w)	Margins	Default	•
Behavioral Symptoms		—	
E0200. Behavioral Symptom - Presence & Frequency	Options	Headers and f	ooters
Note presence of symptoms and their frequency			
Physical behavioral symptoms directed toward others (s.g., hitting, kicking, pushing, scratching, grabbing, abusing others sexually (10200A) 0 - Behavior not enböted		Background gi	raphics
Verbal behavioral symptoms directed toward others (e.g., threatening others, screaming at others, cursing at others) (02008) 0 - Bohavior not exhibited			
Other behavioral symptoms not directed toward others (e.g., physical symptoms such as Ntting or scretching self, pacing, rummaging, public sexual acts, disrubing in public, throwing or smaring food or bodily wastes, or verbal/vecal symptoms like screaming, disruptive sounds (05205C)	Print using sys	tem dialog (℃೫P)	
3 - Belavior Fold Kondeked Including to the second se	0 0051 0		C1
	Open PDF in P	review	
1112, 108 dd GJER Fed. Annanen. Yn Henn			
E0300. Overall Presence of Behavioral Symptoms			
Were any behavioral symptoms in questions E0200 coded 1, 2, or 37 (E0300)			
0 - No -+ Skip to ECBDO, Rejection of Care			
E0500 Impart on Recident			
Did any of the identified symptom(s):		Cancel	Save
Put the resident at significant risk for physical illness or injury? (E0500A)			
Skip this term			

Figure 220: Print Menu

Note: The figure above is a Google Chrome print menu. Other print menus may look slightly different.

f. Click **Save**. The **Save As** popup window opens. *See Figure 221, Save As Popup Window.*

🔟 Save As								×
$\leftarrow \rightarrow \checkmark$	↑ 🛄	>Surveyor Sue> Desktop				∨ C Sea	arch Desktop	م
Organize 🔻	New fold	er					≡	- 🕐
	_	Name		Status	Date modified	Туре	Size	
🛄 Desktop	*	iQIES Learning		0	12/11/2024 3:19 PM	Microsoft Word D	0 18 KB	
🚽 Download	s 📌	LTCSP Information		0	3/21/2024 2:34 PM	Microsoft Word D	0 16 KB	
Document	ts 🖈							
Pictures	*							
🕖 Music	*							
🔀 Videos	*							
TAC	_							
File nam	e: Secti	ion E Assessment 03.13.25						~
typ	e: Word	Document						~
Autho	rs: Surve	eyor Sue	Tags: Add a tag	9	Title: Add	l a title		
	Sav	re Thumbnail						
∧ Hide Folders						Tools 👻	Save	Cancel

Figure 221: Save As Popup Window

- g. Select the destination folder on the left.
- h. Type the desired file name next to **File name**.
- i. Click **Save**.
- j. Open the .pdf from the destination folder selected.

Use/Instructions/Probes Tab

- All investigative areas have the Use/Instructions/Probes tab.
- The Use/Instructions/Probes tab is the default landing tab when the resident is selected in Investigations. See Figure 222, Use/Instructions/Probes Details Landing Page and Table 31, Use/Instructions/Probes Details Landing Page Detailed Callout.
- This Use/Instructions/Probes tab shows Pressure Ulcer. Each Use/Instructions/Probes tab may look slightly different for different investigative areas.
- Some Use/Instructions tabs may have links to additional documentation. Those links are on the top right menu.

← Chovey, Anne (28)	
Room Admit Date BIMS MDS Indicators P-ZA 08/07/24	
Use/Instructions/Probes Critical Elements Investigations Drawing Tool	a 🔟 <u>View Pathway PDF</u>
Pressure Ulcer/Injury ~ Initiated by NHCS_Singy	d Next Investigation >
⊖ ∨ Use	
Use this pathway for a resident having, or at risk of developing, a pressure ulcer (PU) or pressure injury (PI) to determine if facility practices are in place to identi and/or heal pressure ulcers.	ify, evaluate, and intervene to prevent
 Review the following in Advance to Guide Observations and Interviews: The most current comprehensive and most recent quarterly (if the comprehensive isn't the most recent) MDS/CAAs for Sections C, GG, H, J, K, and M. Physician's orders (e.g., wound treatment) and treatment record (TAR). Pertinent diagnoses. Care plan (e.g., pressure relief devices, repositioning schedule, treatment, scheduled skin/wound inspection, or pressure injury history). 	
9 > Observations	
h > Interviews	
V > Record Review	
j > Other Considerations	

Figure 222: Use/Instructions/Probes Details Landing Page

No.	Name	Description
а	View Pathway PDF	This is the pathway document for the investigative area. The pdf document opens in a new tab. Not all investigative areas have pathway documents.
b	Investigative Area	The investigative area for the resident
C	Reason	 Shows how the investigation was initiated. Investigations can be: Manually initiated by a surveyor Created for a linked intake in Offsite Prep Created when the sample is finalized for residents included in the final sample Created for an unnecessary meds candidate Created for residents included in the finalized closed record sample For Unnecessary Medications Review: Click the link under Reason to open a pop-up window with Unnecessary Meds Calculation Details.
d	Next Investigation	The link becomes active when there is more than one investigative area to investigate for a resident
е	Use	Review use of investigative area
f	Instructions	Review investigative area instructions
g	Observations	Review investigative area observations. Not all Use/Instructions have Observations.
h	Interviews	Review investigative area interview questions. Not all Use/Instructions have Interviews.

Table 31: Use/Instructions/Probes Details Landing Page Detailed Callout

No.	Name	Description
i	Record Review	Review investigative area record. Not all Use/Instructions have Record Review.
j	Other Considerations	Review other tags that may help with the investigative area. Not all Use/Instructions have Other Considerations .

Critical Elements tab

- All investigative areas have the **Critical Elements** tab.
- The **Critical Elements** tab is the default landing tab when the resident is selected in **Investigations**. See *Figure 223, Critical Elements Details Landing Page* and *Table 32, Critical Elements Details Landing Page Detailed Callout*.
- This **Critical Elements** tab shows **Pressure Ulcer**. Each **Critical Elements** tab may look slightly different for different investigative areas.
- Surveyors assigned to the investigation can make compliance decisions on this tab.

← Chovey,	Anne (28)				
Room Admit Date P-ZA 08/07/24	BIMS M	IDS Indicators			
Use/Instructions/Probes	Critical Elements	Investigations	Drawing Tool	a 🔟 <u>View P</u> a	athway PDF
Pressure Ulcer/Injury	Reason Initiated by NHC	CS_Singy		d Next Inve	stigation $>$
e Search Probes / CE	f Filter All Que	estions ~ g Vie	w All Surveyors 💿	2/9 ANSWERED	
Question			In Complianc	ce? Tag	~
 Did the facility ensure that a r Receives care, consistent wi Does not develop pressure u unavoidable; and Receives necessary treatme and prevent new ulcers from de 	esident: th professional standards of p lcers unless the resident's clin nt and services to promote the veloping?	ractice, to prevent pressure ulcers, ical condition demonstrates that t e healing of a pressure ulcer, preve	Yes M and hey were nt an infection,	No <u>F0686</u>	ø
If No, cite F686					
 Did the physician evaluate an management of all associated n development of a treatment reg notification of change in the res 	d assess medical issues relate nedical needs, including partic gimen consistent with current sident's medical status related	ed to the resident's skin status and cipation in the comprehensive asse standards of practice, monitoring, to pressure ulcers?	supervise the Second Se	No <u>F0710</u>	0
If No, cite F710					

Figure 223: Critical Elements Details Landing Page

No.	Name	Description
а	View Pathway PDF	This is the pathway document for the investigative area. The pdf document opens in a new tab. Not all investigative areas have pathway documents.
b	Investigative Area	The investigative area for the resident
С	Reason	 Shows how the investigation was initiated. Investigations can be: Manually initiated by a surveyor Created for a linked intake in Offsite Prep Created when the sample is finalized for residents included in the final sample Created for an unnecessary meds candidate Created for residents included in the finalized closed record sample For Unnecessary Medications Review: Click the link under Reason to open a pop-up window with Unnecessary Meds Calculation Details.
d	Next Investigation	The link becomes active when there is more than one investigative area to investigate for a resident
е	Search	Search questions in list to filter to questions with the search criteria
f	Filter	Filter on All Questions, Answered and Unanswered questions.
g	View All Surveyors	Check this box to view answers for other investigation assignees at the highest level of noncompliance. Critical Elements tab is read-only when viewing all surveyor answers.

Table 32: Critical Elements Details Landing Page Detailed Callout

No.	Name	Description				
h	Questions ANSWERED	Shows a count of questions answered next to total questions. The progress bar illuminates in green with each answered question.				
i	Question	Each CE question for the investigative area				
		Allows investigation assignees to make compliance decisions for CE questions. When the response is No , a severity level drop-down menu opens. Select the severity level from 1 to 4.				
i	In Compliance	Level 1 No actual harm with potential for minimal harm				
,		Level 2 No actual harm with a potential for more than minimal harm that is not immediate jeopardy				
		Level 3 Actual harm that is not immediate jeopardy				
		Level 4 Immediate jeopardy to resident health or safety				
k	Тад	Click the tag and the Regulation Text/Interpretive Guidance window pops up. Select Regulation or Interpretive Guidance tabs.				
Ι	\checkmark	A white check mark in a green circle is shown in the far right column when the question has been answered.				

Investigations tab

- The **Investigations** tab is only available when going into an investigation by resident. See *Figure 224, Investigations Tab* and *Table 33, Investigations Tab Detailed Callout.*
- The Investigations tab shows all investigative areas assigned to the resident.
- This **Investigations** tab shows **Pressure Ulcer**. Each **Investigations** tab may look slightly different for different investigative areas.

← Ch	ovey, Ar	nne (28)				
Room P-ZA	Admit Date 08/07/24	BIMS MDS In	idicators			
Use/Instructio	ons/Probes	Critical Elements	Investigations	Drawing Tool		a III <u>View Pathway PDF</u>
b Pressure UI	cer/Injury v	Reason Initiated by NHCS_S	ingy			Next Investigation >
d Investigative Are	ia ‡	e Assigned To		fnv. Reason	\$	g Potential Citations
© Pressure Ulce	r/Injury	NHCS_Singy	~	Initiated by	NHCS_Singy	-

Figure 224: Investigations Tab

Tahle	33.	Investigations	Tah	Detailed	Callout
IUDIE	JJ .	mvestigutions	IUD	Detuneu	cunout

No.	Name	Description
а	View Pathway PDF	Click link to view specific investigations area. The form opens in a separate tab.
b	Investigative Area	The investigative area for the resident
С	Reason	 Shows how the investigation was initiated. Investigations can be: Manually initiated by a surveyor Created for a linked intake in Offsite Prep Created when the sample is finalized for residents included in the final sample Created for an unnecessary meds candidate Created for residents included in the finalized closed record sample For Unnecessary Medications Review: Click the link under Reason to open a pop-up window with Unnecessary Meds Calculation Details.
b	Investigative Area	 Click resident to see Investigations tab, which shows all investigative areas assigned to the resident. Click investigative area to see the <u>Residents tab</u>, which shows all residents assigned to the investigative area.
с	Assigned To	Surveyor assigned to investigation. More than one surveyor can be assigned to an investigation.
d	Inv. Reason	How the investigation (Inv) was created.
е	Potential Citations	Shows potential citations

Drawing Tool tab

- All investigative areas have the **Drawing Tool** tab.
- This **Pressure Ulcer** and the **Abuse Drawing Tool** tabs are the only drawing tools that are different than the other investigative areas. Those tabs show four images of a body on which to place the ulcer or abuse. See *Figure 225, Drawing Tool Tab.* All other **Drawing Tool** tabs will be blank for free drawing.
- The **Drawing Tool** tab works exactly like the facility tasks drawing tool. Please review <u>Facility Tasks Drawing Tool</u> for details on how to use the drawing tool.



Figure 225: Drawing Tool Tab

Investigations Residents tab

Note: The **Investigations Residents** tab is only available when going into an investigation by investigative area.

Click the investigative area on **Investigations** landing page to see a list of all residents who fall under that specific investigative area. See *Figure 226, Investigations Residents Tab.*

← Abuse						
Use/Instructions/Prob	es Critical Elements	Residents	Drawing Tool			[]]] View Pathway PDF
Aardvark, Alex (23)	Reason Initiated by NHCS_Si	Room ngy GH-17	Admit Date B 10/20/22	BIMS	MDS Indicators	Next Resident 义
Resident 👙	Room 🗧 🛛 Admit Date 💠	BIMS 🗧 Assigned	Го		Inv. Reason 🖕	Potential Citations
Aardvark, Alex (23)	GH-17 2022-10-20	NHCS_S	ìingy	~	Initiated by NHCS_Singy	-
Aubergine, Alex (20)	BV-10 2022-08-01	NHCS_S	Singy	~	Initiated by NHCS_Singy	-
ा <u>Toucan, Sam (22)</u>	AQ-10 2020-07-23	NHCS_S	Singy	~	Initiated by NHCS_Singy	-

Figure 226: Investigations Residents Tab

22.6 Investigation and Resident Notes

Purpose: To document notes for each investigation during the survey.

General Notes

- Investigation and Resident Notes are not the same as Surveyor Notes and are in addition to Surveyor Notes. Refer to <u>Surveyor Notes</u> in this document for further details on those notes.
- Investigation notes are specific to the resident and investigative area.
- Resident notes display for all investigative areas for the resident.
- Any survey team member assigned to the investigation can add, edit, delete, or view Investigation and Resident Notes.
- Surveyors who are not assigned to the investigation, but are on the survey team, can view the Investigation and Resident Notes.
- Some roles that cannot be added to the Survey Team are able to view Investigation Notes and Resident Notes as read-only.

Navigate to Investigation and Resident Notes

• Click the Notes icon on the top right of the screen to open all Notes. The icon is located directly under the user name. See *Figure 227, Notes Icon*.



Figure 227: Notes Icon

• Investigation and Resident Notes open in combination with Surveyor Notes. Click on any tab to leave a note for that specific area. See *Figure 228, Facility Notes View.*

Note: The note area that is in use has a white background.

Investigation Notes	🖻 Resident Notes
Surveyor Notes	

Figure 228: Facility Notes View

• The Investigation and Resident Notes default to opening on the right. Click either the Investigation or the Resident Notes bottom menu icon to open the Facility Notes on the bottom of the page. See *Figure 229, Investigation and Resident Notes Bottom Screen Icon.*



Figure 229: Facility Notes Bottom Screen Icon

 Notes can be resized on the screen by dragging the left line (when the notes are on the left) or the top line (when the notes are on the bottom) of the Notes panel. Hover over line until the directional arrows are shown, then drag the line in either direction.

Create an Investigation or a Resident Note

- When there are Care Area Notes for the Care Area linked to the investigative area, the Care Area Notes will be copied into the Investigation Notes for the investigation assignee at the time it was created. The surveyor assigned to the investigation can keep the copied notes or delete them from their Investigation Notes.
- The Care Area Notes are not copied for any surveyors subsequently assigned to the investigation. The copied Care Area Notes can be viewed by all Surveyors in the **View All Surveyors** view for Investigation Notes.
- Click in either the Investigation or Resident Notes text area to create a note.
- A date/time stamp is automatically inserted when the surveyor starts to type in the text area when the text area is blank. Click Date/Time Stamp icon to insert date for additional notes.
- Type notes. See *Figure 230, Sample Investigation Note*.



Figure 230: Sample Investigation Note

- Notes are autosaved.
- The Last saved date and time shows at the bottom of the Notes. See *Figure 231, Notes Last Saved Date and Time.*

	P	Inve	estig	ation	Notes		E R	esider	nt Notes	5				
	١	Sur	veyo	r Note	s							1	31	" ~
1	1	╚	å	O	×	Ū	¢	ð	в	Ι	Ū	<u></u>	Ŷ	•••
08 a t lar	3/22 ban rge	2/20 ana food	24 7: peel figh	40 PM on the t amo	1 Talked e groun ng resid	d witl d an dent	h 3 aides d CNA S s.	and mith s	found ti slipped a	hat F and f	Resid fell. T	ent ‡ 'his s	≠23 t tart	threw ed a
	La	ast sa	ved: 0	8/22/2	024 7:41	РМ								

Figure 231: Notes Last Saved Date and Time

Custom Toolbar Functions

There are 4 custom toolbar options among the normal standard formatting options. See *Figure 232, Notes Custom Toolbar Functions.*

Investigation Note	es	🖻 Re	esident	Notes			,		
Surveyor Notes							ł	3 4	
a @ & ©	x D	4	Ì	в	Ι	ñ	<u>a</u>	×	•••

Figure 232: Notes Custom Toolbar Functions

From left to right they are:

- o View All Surveyor Notes
- Insert Date/Time Stamp
- o Insert Resident ID
- o Notes History

Note: Hover over the icon to see the name of the icon.

• View All Surveyor Notes

View all team member's Surveyor Notes. See *Figure 233, View All Surveyor Notes*. Click any name to view the note.



Figure 233: View All Facility Notes

Click **My Notes** to return to the user's Notes.

• Insert Date/Time Stamp

Insert the current date/time at the cursor placement.

• Insert Resident ID

Select **Resident ID** to be inserted into the Notes. The resident ID of the investigation resident is inserted.

• Notes History

View a history of all autosaved Notes entries. If a previously saved entry is deleted in error, it can be accessed from the Notes History and copied and pasted into the current Notes.

• Help

There is also a help icon on the toolbar which can be accessed for additional information as well as keyboard shortcuts. See *Figure 234, Notes Formatting Menu.*



Figure 234: Notes Formatting Menu

Note: Click the horizontal ellipsis to view the second row of formatting options.

22.7 Complete an Investigation

Note: An investigation is completed when at least one assigned surveyor has answered all of the CE questions for an investigation. See *Figure 235, Completed Investigation*.



Figure 235: Completed Investigation

Check the **Hide Completed Investigations** checkbox to filter completed investigations. See *Figure 236, Hide Completed Investigations*.



Figure 236: Hide Completed Investigations

23. Potential Citations

Purpose: To review all tags from investigations and facility tasks marked as not in compliance and to evaluate survey data and determine whether or not to cite each tag.

- Only the TC can edit potential citations.
- The highest noncompliance level is selected when a tag has multiple surveyors citing noncompliance, but all notes are included.
- The four tabs organize citations by **All Citations**, **Cited**, **Not Cited** and **Undeclared**. The numbers next to the tab titles shows how many tags there are.
- When a surveyor removes their notes or changes their compliance answers, it reflects immediately in Potential Citations.
- **23.1** Click **Potential Citations** on the left menu on the drop-down left menu under Investigation. The **Potential Citations** window opens to the **All Citations** tab. See *Figure 237, Potential Citations*.

Potential Citati	ions						
All Citations 5	Cited 2 Not Cited D Undeclared 3	Create Citations					
Free from Abuse and Ne	glect 🧿 Cited) 🔁 F0600	Declaration * 🔹 Cite 🔵 Don't Cite					
© F0600 O Cited Free from Abuse and Neglect Max Severity 4	S/S* <u>Select</u> Singular Event () Citation Categories*	Residents/Facility • Legge, Peg (12) v					
Citation Ready 0 F0004 Undeclared Right to be Free from Physical Restraints Max Seventy 3	Opening Statement dared M □ ← < B I ⊥ ⊥ ▲ < Rubik < 12pt < I ↓ I ← < II ↓ ▲						
© F0607 Undeclared Develop/Implement Abuse/Neglect Policies Max Seventy 4	Potential Citation Documentation LEGGE, PEG (12) NHCS_SINGY, PAT - ABUSE (SELECTED)						
© F0804 © Cited Nutritive Value/Appear, Palatable/Prefer Temp Max Seventy 3 Moved From F0812	11/19/2024 8:38 PM Resident #12 complained that someone was. stealing her prosthetic leg. There were oth leg to beat other residents with. LEGOE, PEG (12) NHCS_SINGY, PAT - RESIDENT NOTE (SELECTED)	ner confirmed complaints that a resident was using the					
	11/19/2024 8:39 PM Resident was not able to move about without her fake leg.						

Figure 237: Potential Citations

23.2 Review citations.

Note: Click citation number link to review citation regulation text and interpretive guidance.

- **23.3** Review notes.
 - **Note**: Potential Citation documentation comes from Investigation Notes, Resident Notes, and Facility Notes that are relevant to the F-tag. The area is always cited. See <u>Citation Cited figure</u>.
- 23.4 Select Cite or Don't Cite.

<u>Cite</u>

a. Select the F-tag to update.

Note: F-tag is highlighted in blue.

- b. Select the radio button next to **Cite**.
- c. Add the **Scope/Severity (S/S)** level. See *Figure 238, F-Tag Cited*.

Notes:

- Click **Select** to review scope and severity levels.
- IJ date fields open when **S/S** is a **J** or higher. **IJ Start** and **End Dates** must be added, along with whether it was a singular event. See *Figure 239, IJ Start/End Dates*.
 - IJ scope/severity levels of **J**, **K**, or **L** trigger the IJ start/end date.
 - o IJ scope/severity levels of **G** or **J** trigger singular events
 - IJ scope/severity levels of **F**, **H**, **I**, **J**, **K**, or **L** for an SQC tag trigger the Extended Survey Facility Task.

ate (i) IJ E	nd Date (i) Cita	ation Categories *
/2025 0)2/10/2025	Complaint 🔽 Recertification
	2025	2025 02/10/2025



• When **Citation Categories** is automatically checked, it can be changed by the TC.

Note: Citation Categories is dependent on the survey category as well as whether the investigation or facility task is associated to an intake.

Nutritive Value/Appear, Pala	atable/Prefer Temp 🥚 Othed) 😨 <u>F0804</u>	Declaration * 🜔 Cite 🔵 Don't Cite
© F0600 Octed Free from Abuse and Neglect Max Sevently 4 Citation Ready	S/S* Select Singular Event I G Citation Categories* Complaint Recertification	Residents/Facility * Facility
© F0004 Undeclared Right to be Free from Physical Restraints Max Sevently 3	Opening Statement ※ ① 今 ♂ B I 및 ∠ ~ Rubik ~ 12pt ~ III : III : III : III : III : III : IIII : IIII : IIII : IIII : IIIII : IIIIII	
© P0607 Undeclared Develop/Implement Abuse/Neglect Policies Max Severity 4	Potential Citation Documentation LEGGE, PEG (12) The area in which the notes were written NHCS_SINGY, PAT - ABUSE GETERING	ints that a resident was using the
© F0804 © Cited Nutritive Value/Appear, Palatable/Prefer Temp Max Sevently 3 Moved From F0812 Citation Ready	10/0/2024 8:30 PM Resident #12 complained that someone was, stealing ner prostnetic leg, there were other commed complained that someone was, stealing ner prostnetic leg, there were other commed complained that someone was, stealing ner prostnetic leg. There were other commed complained that someone was, stealing ner prostnetic leg.	ints that a resident was using the
 F0808 Undeclared Therapeutic Diet Prescribed by Physician 	ny ny 2024 0.37 FPI nesident was not able to nove about without her lake leg.	A

Figure 239: F-Tag Cited

- d. Add the **Residents/Facility** from the drop-down menu.
 - **Note**: The **Residents/Facility** drop-down menu shows either the resident or the facility, along with the surveyor name and severity level. See *Figure 240, Residents/Facility Drop-Down Menu*.



Figure 240: Residents/Facility Drop-Down Menu

e. Update the **Opening Statement**.

Notes:

- The automatic text in the **Opening Statement** field is there to help. It can be changed.
- The field automatically saves and shows the last saved date on the bottom of the field.
- f. Review the Potential Citation Documentation.

```
Note: Only the selected Potential Citation Documentation notes
become the Citation Findings. In the example in the <u>F-Tag Cited</u>
<u>figure</u>, the selected notes match the selected facility choice and
severity.
```

Don't Cite

a. Select the F-tag to update.

Note: F-tag is highlighted in blue.

- b. Select the radio button next to **Don't Cite**. The **Reason Not Cited** dropdown menu opens. See *Figure 241, Reason Not Cited*.
 - Note: Type A citation can be moved to another tag when Other, Explain is the reason.

Right to be Free from Pl	nysical Restraints 💿 Not Cited 🕞 F0604 Declaration* 🔿 Cite 🕥 Don't Cite
© F0600 © Cited Free from Abuse and Neglect Mas Sewrity 4 Citation Ready © F0604 © Not Cited Right to be Free from Physical Restraints	Reason Not Cited * ✓ Select one Move to another tag Facility provided additional information Evidence did not support deficient practice Medication error rate less than 5% Separate survey investigating or citing Marked in error Other, explain
© F0804 © Cited	11/19/2024 8:38 PM Resident #12 complained that someone was. stealing her prost to Beat Other residents with. LEGGE, PEG (12) NHCS_SINGY, PAT - RESIDENT NOTE (SELECTED) 11/19/2024 8:39 PM Resident was not able to move about without her fake leg.

Figure 241: Reason Not Cited

c. Verify the F-tag has a white checkmark in a blue circle for the tag and white checkmark in a blue circle for **Not Cited**. See *Figure 242, F-Tag Updates*.



Figure 242: F-Tag Updates

Move to Another Tag

An F-tag can be moved to another F-tag.

- Any F-tag that has been moved is automatically set to **Cited**.
- The notes from the original citation are moved and can be reviewed.
- Am F-tag cannot be moved to an F-tag that has already been moved.
- a. Select **Move to Another Tag** from the **Reason Not Cited** menu. See Reason Not Cited **figure**.
- b. Type new F-tag number in **New Tag** field. The tag must be cited or undeclared to move the new citation.
- c. Click Save.
 - **Note**: The citation now notes **Moved from [tag]** on citation. See *Figure 243, Move a Citation Tag.*

S F0812	O Cited			
Food				
Procurement,Store/Prepare/S				
erve-Sanitary				
Max Severity 4	Moved From F0600			

Figure 243: Move a Citation Tag

Create Citation

a. The **Create Citation** button is disabled until all tags have been reviewed and completed.

- The tag cannot already exist as a citation
- Citations cannot be locked
- b. Click Create Citation. A pop-up window opens.

24. Resources

Purpose: Survey protocols and interpretive guidelines serve to clarify and/or explain the intent of the regulations. All surveyors are required to use them in assessing compliance with federal requirements. Deficiencies are based on violations of the regulations, which are to be based on observations of the nursing home's performance or practices.

Notes:

The resources provide additional information about the background and overview of the final rule, frequently asked questions, and other related resources.

Click **Resources** on the left menu. See *Figure 244, Resources*. The resources automatically download.

Nursing Home	
Basic Information	
Teams	
LTCSP	
Survey Prep	Ý
Initial Pool	~
Investigation	Ý
Resources 🕁	

Figure 244: Resources

25. Search for a Survey

Purpose: To search for a survey.

- **25.1** Go to **Survey & Certification** at the top of the iQIES home page. Click the arrow to open the drop-down menu.
- **25.2** Click **Search**. The **Search** screen opens. See *Figure 245, S&C Search*.

🕏 iQIES	Survey & Certification ∨	Assessments \lor	Reports 🗸			
	Search					
Welcome back, Pat						

Figure 245: S&C Search

- 25.3 Click Surveys tab.
- 25.4 Select Provider or DBA (Doing Business As), CCN (CMS Certification Number) or Survey ID from the drop-down menu under Search for Surveys. See Figure 246, Search.

Search				
Providers Surveys	Intakes			
Search for Surveys Provider or DBA Search				
Show Advanced Search CCN Survey ID				
Search Reset				

Figure 246: Search

- **25.5** Type search criteria.
- **25.6** Click **Search**. The survey information shows below. See *Figure 247, Survey Search Results*.

Note: Click Show Advanced Search for a more detailed search.

Search					
Providers Surveys In	ntakes				
Search for Surveys					
Provider or DBA V House of the Rising	Sun				
Show Advanced Search					
Search Reset	Su	rvey Number			
State: Florida ×		/			
1 - 10 of 22 Surveys		/			
Provider	Survey	Survey Category	Survey Status	Citations	Exit Date
House of the Rising Sun 1 Main St, Anytown, FL 87960	Health D2308-H1	Initial Certification	Writing in progress	4	01/05/2022
FACID IQ0000002521599					
House of the Rising Sun 1 Main St, Anytown, FL 87960	Health E7E27-H1	Focused Infection Control	Closed	1	03/29/2022
FACID IQ0000002521599					
House of the Rising Sun 1 Main St, Anytown, FL 87960	Health 1051FD-H1	Complaint	Closed	1	09/07/2022
FACID IQ0000002521599					

Figure 247: Survey Search Results

- **25.7** Click the survey number to view basic information. The **Basic Information** window opens. See *Figure 248, Survey Basic Information*. The top gray menu bar shows:
 - Survey status
 - Survey category
 - Start and exit dates
 - Revisit status
 - Track status
 - Survey actions drop-down menu

The survey basic information shows:

- Survey Type
- Enforcement Case ID
- Survey Categories
- Survey Extents
- Regulation Sets
- Survey Status

Status Category New Complaint Re-Licensure +1 more	Start Date Exit Date 07/11/2020 No information	Revisit Status Track Status Not Determined 13C27C 25%	Survey action -
Basic Information Manage the basic information for this surv	vey.		Edit
Survey Type Enforcement Case ID		Health No information	
Survey Categories Federal Categories		Complaint	
State Categories		Recertification Re-Licensure	
Intakes to Include in Complaint Survey Survey Extents		Compraint 715229	
Survey Extents		No information	
Regulation Sets			
Federal Regulation Sets		Long Term Care Facilities (FED - F - 07.02)	
State Regulation Sets		 State: Nursing Facilities (ST - N - 4.1) NF State Licensing (ST - C - 2.5) Core Licensure (ST - C - 2.14) 	
Survey Status			
Survey Status		Open	
Start Date		07/11/2020	
Exit Date		No information	
Survey Due Date		No information	

Figure 248: Survey Basic Information

26. Citations

Purpose: Add, delete, edit, or review a citation for long term care facilities outside the long term care survey process.

Notes:

- The citations process works the same regardless of the provider type.
- Use <u>Potential Citations</u> to add a new citation when the survey is part of the LTCSP.
- Citation findings, memo text, and deficient practice statements are automatically saved as they are entered into iQIES.
- Only the team member who created a citation can delete that citation.
- QA team members can act on behalf of surveyors and have the same privileges as a survey team member does.
- Click Return to Citations to get to the Citations screen, if desired.
- Notifications are shown in yellow boxes. Refer to *Figure 249, Citation Notification Example*. Read the notification and follow the directions, if necessary.

Date sent not entered for Statement of Deficiencies Enter Date Sent to the provider on the statement of deficiencies tab.



Click any of the following links to go directly to the process:

Citation Overview

Manage Survey Categories

Add a Citation to a Health Survey

Add a Citation to an LSC Survey

Delete a Citation

Add a Deficient Practice Statement

Add Findings to a Citation

Content Library

Add an Attachment

Conditions Needed to Lock a Citation

Lock/Unlock a Citation

Merge Citation Findings

Create a Revisit Survey

Create a Revisit Survey for Specific Citations

View Older Revisit Surveys

Immediate Jeopardy
26.1 Citation Overview

- Citation Statuses are:
 - Not Started
 - o In Progress
 - Ready for Merge
 - Merged In Progress
 - Writing Complete
 - Corrected
- The Actions menu has the following choices: Add New Findings, Edit Findings, Delete Citation, View Findings. The selection is dependent on the citation status.
 - 26.1.1 Click **Citations** on the left menu. The **Citations** window opens. See *Figure 250, Citations*.

LTCSP	Citations Add and manage citations tags for this survey.	
Survey Prep V		
Initial Pool 🗸 🗸		
Investigation ~	Add Citation Manage Survey Categories Lock Citations i	
Resources 🕁		
	2 Citations Filter by: LONG TERM CARE	FACILITIES (FED - F - 20.00) V All Tag Types V All Authors V
Citations		
Statement of Deficiencies	Citation ID 🕆 Regulation 🕆 Tag Type 🗄 Set	verity/ Citation ÷ Authors Actions ope Status ÷ Authors Actions
ePOC (j	F0554 LONG TERM CARE FACILITIES Requirement Resident Self-Admin Meds- (FED - F - 20.00)	Pat Actions - Writing NH_CMSGU_Sin
Resolution	Clinically Approp	Complete ^{gy}
Independent Informal Dispute Resolution	F0558 LONG TERM CARE FACILITIES Requirement Reasonable Accommodations (FED - F - 20.00)	In Progress Pat Actions NH CMSGU Sin
Plan of Correction	Needs/Preferences	gy
CMS-1539		
் СМS-670		

Figure 250: Citations

26.1.2 Click the citation to open **Citation Overview**. The Citation Overview window opens. See *Figure 251, Citation Overview*.



Figure 251: Citation Overview

- **Note:** The **Edit** button is only viewable if the citation contains editable fields.
- 26.1.3 Click **Edit** to edit the Overview. The **Edit Citation Overview** window opens. See *Figure 252, Edit Citation Overview.*

Edit Citation Overview F0554: Resident Self-Admin Meds-Clinically Approp Requirement					
All required fields are marked with an	All required fields are marked with an asterisk (*)				
Tag Type Requirement	Regulation Set LONG TERM CARE FACILITIES (FED - F - 20.00)	Survey Category *			
Select V	Severity and Scope Grid	×			
Severity No information Scope No information	Scope JKL GHI				
Substandard Quality of Care No information Past Noncompliance *	D E F A B C				
Yes No Save Cancel					

Figure 252: Edit Citation Overview

- Note: Click the grid next to Severity/Scope to view the Severity and Scope Grid. The drop-down menu displays Severity/Scope letters.
- 26.1.4 Click Save. The screen returns to the Citation Overview.

26.2 Manage Survey Categories

- **Note**: Citations that are associated with a complaint survey category can only be removed after the allegation is removed from the citation page.
 - 26.2.1 Click **Manage Survey Categories**. See *Figure 253, Manage Survey Categories*. The **Manage Survey Categories** window opens.

Citations		
Add and manage cita	tions tags for this survey.	
Add Citation	Manage Survey Categories	Lock Citations (i)

Figure 253: Manage Survey Categories

26.2.2 Check the box next the correct survey category. See *Figure 254, Manage Survey Categories Window*.

Note: More than one category can be checked.

Manage Survey Categories		
Manage the survey categories for each citation. Citations that are associated with a complaint s removed after the allegation is removed from the citation page.	survey category can only be	
All required fields are marked with an asterisk (*)		
Federal Citations		
2 Federal Citations		
Тад	Federal Survey Category *	
F0554 - Resident Self-Admin Meds-Clinically Approp	Recertification	
F0558 - Reasonable Accommodations Needs/Preferences	✓ Recertification ☐ Complaint	
Save Cancel		

Figure 254: Manage Survey Categories Window



26.3 Add a Citation for a Health Survey

26.3.1 Click **Add Citation** in the **Citations** window to add a citation to the survey. The **Add Citations** window opens. See *Figure 255, Add Citation Window*.

Add and manage citations tags for this survey.	Citations	
	Add and manage citat	tions tags for this survey.
Add Citation Lock Citations	Add Citation	Lock Citations

Figure 255: Add Citation Window

- Search for citations in the **Search by citation tag number, title,** or keyword text box. Click the magnifying glass icon to search.
- Filter citations by **Regulation Sets** and **Tag Types**, if desired.
- 26.3.2 Click **Add** next to any citation to add it. The citation will be added to the **Added Citations** list on the right. See *Figure 256, Added Citations* and *Table 34, Added Citations Detailed Callout*.

Add Citations	
Find and add citation tags for this survey.	
a Reset	
Search by citation tag number, title, or keyword	
1 - 20 of 210 Citations Filter by: All Regulation Sets V All Tag Types V	
F0000 - INITIAL COMMENTS Merrio	Added Citations (2)
> LONG TERM CARE FACILITIES (FED - F - 20.00)	F0550 - Resident \times Rights/Exercise of Rights
	F0553 - Right to Participate in Planning X
Postu - Definitions Requirement Past Noncompliance Add LONG TERM CARE FACILITIES (FED - F - 20.00)	Care
LONG TERM CARE FACILITIES (FED - F - 20.00)	
EAEST Dights Everyised by Depresentative	h
Requirement Past Noncompliance Add	Save
LONG TERM CARE FACILITIES (FED - F - 20.00)	Cancel
F0552 - Right to be Informed/Make Treatment	
LONG TERM CARE FACILITIES (FED - F - 20.00)	
E0553 _ Right to Participate in Planning Care _ Requirement	
LONG TERM CARE FACILITIES (FED - F - 20.00)	

Figure 256: Added Citations

Table 34: Added Citations Detailed Callout

No.	Name	Description
а	Search	Search for a citation by tag number, title or keyword.
b	Filter by	Filter by regulation sets and tag types (Conditions, Standard, Licensure, Element, Memo, Requirement).
с	F-tag	The federal tag and title. Click the caret to view regulation text and interpretive guidelines.
d	Past Noncompliance	Click checkbox next to Past Noncompliance when facility is noncompliant. Checkbox is available when applicable.
е	Severity/Scope grid	Click the grid to view the severity/scope grid to select a severity/scope.
f	Add	Click Add to add the F-tag to the citation.
g	Added Citations [#]	Added citations appear on this list. The number next to Added Citations is the number of citations added.
h	Save	Click to add citation tags.

26.3.3 Click **Save** to save citation tags to the survey. The screen returns to the **Citations** window.

26.4 Add a Citation for an LSC Survey

Note: Citations are associated with a building for Life Safety Code Surveys.

26.4.1 Click **Add Citation** in the **Citations** window to add a citation to the survey. The **Add Citations** window opens. See *Figure 257, Add LSC Citation Window.*



Figure 257: Add LSC Citations Window

- 26.4.2 Click the radio circle next to the desired building. See *Figure 258, Add LSC Citations Step 1.*
 - **Note**: Each citation must be associated with a building. This process must be repeated to add a citation to a different building. If the building is not in the building list, add the building. Review <u>Locations</u> for details on how to add a building.
- 26.4.3 Click **Save Building & Continue** to go to **Step 2** to complete adding the citation.

<mark>Add</mark>	Citations			
<i>Step 1 d</i> Select a Details.	Step 1 of 2 Select a building or the Emergency Preparedness category for this new citation. New buildings can be added in the Locations section of Provider Details.			
Selec	t Building or Category *			
۲	 Building 1 Existing Indicator B1 Building Active No effective date 			
0	Building 2 New Indicator B2 Building Active No effective date			
Save	e Building & Continue Cancel			

Figure 258: Add LSC Citations Step 1

26.4.4 Click **Add** next to any citation to add it. The citation will be added to the **Added Citations** list on the right. See *Figure 259, Add LSC Citations, Step 2.*

Add Citations	
Step 2 of 2 Find and add citation tags for this selected building or category	
Selected Building or Category Change Building	
> Building 1 Existing Indicator B1 Building ● Active No effective date	
Click Add to add a ci	tation
C Reset Search by citation tag number, title, or keyword Image: Comparison of the second se	Added citations appear here
Click on any arrow to view citation details 1- 20 of 100 Citations Filter by: All Regulation Sets All Tag Types	↓
K0000 - INITIAL COMMENTS Memo LSC 2012 ASC and ESRD Existing (FED - K - 03.02)	Added Citations (2) K0131 - Multiple Occupancies
K0100 - General Requirements - Other Standard LSC 2012 ASC and ESRD Existing (FED - K - 03.02) Image: Comparison of the c	K0211 - Means of Egress - \times General
K0111 - Building Rehabilitation Standard LSC 2012 ASC and ESRD Existing (FED - K - 03.02) Add	
K0131 - Multiple Occupancies Standard LSC 2012 ASC and ESRD Existing (FED - K - 03.02) Add	Save
K0161 - Building Construction Type and Height Standard	Cancei

Figure 259: Add LSC Citations, Step 2

- Click any citation to view details about the citation.
- Click the X next to the tag number under Added Citations to remove a citation before saving, if desired.
- 26.4.5 Click **Save** to save citations to the survey. The screen returns to the **Citations** window.

26.5 Delete a Citation

- **Note**: The citation cannot be deleted by the user if another team member has added findings. A TC or a QA Teams member can delete the findings when findings are merged.
 - 26.5.1 Click **Delete Citation** under the **Actions** menu on the Citations page. See *Figure 260, Actions Delete Citation Drop-Down Menu.* A confirmation pop-up window appears.



Figure 260: Actions Delete Citation Drop-Down Menu

26.5.2 Click **Confirm**. See *Figure 261, Delete Citation Confirmation Pop-up Window*. The citation has been deleted.



Figure 261: Delete Citation Confirmation Pop-up Window

26.6 Add a Deficient Practice Statement

Note: The Content Library stores reusable content. Refer to <u>Content</u> <u>Library</u>, for more information.

- 26.6.1 Click the **Citation ID**. The **Citation Overview** window opens.
- 26.6.2 Click **Deficient Practice Statement** on the left menu. See *Figure 262, Deficient Practice Statement.* The **Deficient Practice Statement**. The **Deficient Practice Statement** window opens.

Home Health Agency Non-Deemed	Citation Overview	
< Return to Citations	E0037: EP Training Program Standard	
Citation Overview	Тад Туре	Standard
Deficient Practice Statement	Regulation Set	Emergency Preparedness (FED - E - 1.01)
Citation Findings	Survey Category	Recertification

Figure 262: Deficient Practice Statement

26.6.3 Click the caret to review the **Regulation Text and Interpretive Guidelines**. See *Figure 263, Regulation Text and Interpretive Guidelines*.

Note: The **Regulation Text and Interpretive Guidelines** are helpful to write the **Deficient Practice Statement**.



Figure 263: Regulation Text and Interpretive Guidelines

26.6.4 Click Add Deficient Practice Statement.

- 26.6.5 Type the Deficient Practice Statement in the text box. See *Figure 264, Deficient Practice Statement Text Box.*
 - **Note:** Click **Show Regulation Text and Interpretive Guidelines** for helpful text and guidelines in filling out the Deficient Practice Statement. Click again to hide the text.

Add Deficient Practice Statement
G0350: Release of patient identifiable OASIS info. Condition
> Show Regulation Text and Interpretive Guidelines
५ ८ в I ⊻ ∺ × ≡ र ⊑ ≣
Save

Figure 264: Deficient Practice Statement Text Box

Note: Be aware that two users can be in Edit mode in the Deficient Practice Statement at the same time. See Figure 265, Concurrent Editor Notification.

One user will overwrite the other person's data.

- Exit **Edit** mode if either of these notifications appears: <u>Concurrent Editor Notification</u> or <u>DPS Pencil Icon</u>.
- Carefully verify that any input has been saved correctly. Be sure to refresh the screen, if necessary.



Figure 265: Concurrent Editor Notification

- A pencil icon is shown next to **Deficient Practice Statement** on the left menu when another user is editing the text area.
- Click the pencil and an explanatory text shows the name of the user who is editing the **Deficient Practice Statement**. See *Figure 266, DPS Pencil Icon*.



Figure 266: DPS Pencil Icon

26.6.6 Click Save.

26.7 Add Findings to a Citation

- **Note**: The Content Library stores reusable content. Refer to <u>Content Library</u>, for more information.
 - 26.7.1 Click **Add Findings** in the **Actions** menu next to the correct citation on the **Citations** window. See *Figure 267, Citation Add Findings.* The Citation Findings window opens.



Figure 267: Citation Add Findings

Note: To view findings, edit comments, or delete memo for an existing citation, click the **Actions** drop-down menu in the **Citations** window. See *Figure 268, Actions Drop-Down Menu*. The respective window opens, and the specific action can be performed.



Figure 268: Actions Drop-Down Menu

26.7.2 Click Add Findings. The Add Citation Findings window opens. See *Figure 269, Add Citation Findings.*

Add Citation Findings
G0350: Release of patient identifiable OASIS info. Condition
All required fields are marked with an asterisk (*)
> Show Regulation Text and Interpretive Guidelines
Deficient Practice Statement Add Deficient Practice Statement
mere is no bencient Practice Statement for this citation.
Findings *
्रे ∂ B I ⊻ ≔ ४ ⊑ ४ ⊑ ४ ⊑ द ∎
Save

Figure 269: Add Citation Findings

Note: Be aware that two users can be in **Edit** mode in **Findings** at the same time. See *Figure 270, Concurrent Editor Notification.*

One user will overwrite the other person's data.

- Exit **Edit** mode if either of these notifications appears: <u>Concurrent Editor Notification</u> or <u>DPS Pencil Icon</u>.
- Carefully verify that any input has been saved correctly. Be sure to refresh the screen, if necessary.



Figure 270: Concurrent Editor Notification

- A pencil icon is shown next to **Citation Findings** on the left menu when another user is editing the text area.
- Click the pencil and an explanatory text shows the name of the user who is editing the **Findings**. See *Figure 271, Findings Pencil Icon*.



Figure 271: Findings Pencil Icon

- 26.7.3 Type details in the **Findings** fields. Once writing starts, the **Citation Findings Status** opens below.
 - Note: It is possible to copy existing text and paste it in the citation field. Copy the text (right click or Ctrl + C) and use Ctrl + V on the keyboard to paste.
- 26.7.4 Select In Progress or Writing Complete for the status.
- 26.7.5 Click **Save**. The **Citation** window opens. Citation details are shown.

26.8 Content Library

Purpose: The Content Library is a place where reusable text content can be stored.

Note: The Content Library can be accessed from both the **Deficient Practice** Statement Edit window and the Citations Findings or Edit window. See *Figure 272, Content Library Icon.*



Figure 272: Content Library Icon

26.8.1 Click the **Content Library** icon. The **Content Library** pop-up window opens. See *Figure 273, Content Library Pop-up Window* and *Table 35, Content Library Popup Window Detailed Callout.*

- The Content Library is optional.
- Once opened, some fields in the Content Library are required.

	ontent Library					
Enter autho	or, tag, regulation set title, description	, or keyword				
imes Hide A	Advanced Search					
REGUL	ATION SET		CONTENT			
Regula	ation Sets		5 Last Modif	ied Date		
Selec	t	\$	From			
Type						
Selec	t	\$	То			
			Category			
			6 Select			\$
Searc	h Reset					
Searc	h Reset					
Searc My Conte	h Reset					
Searc My Conte Tag ÷	h Reset ent All Content 9 Regulation Set ‡	Author ‡	Description ‡	Published 🗘	Last Modified 🗘	Ð

Figure 273: Content Library Pop-up Window

No.	Name	Description
1	Search Content Library	Type Author, Tag, Regulation Set Title, Description, Keyword
2	Show/Hide Advanced Search	Click Show Advanced Search to view additional selections. Click Hide Advanced Search to remove selections
3*	Regulation Set	Select from a list of regulation sets
4*	Туре	Type options are State or Federal, not active reg sets
5*	Last Modified Date	The Last Modified Date is the date the content was initially created or last changed/modified
6*	Category	Search from All, Deficient Practice, Findings
7	Search	Click Search to search for the content
8	My Content	This tab has a list of all content created by the user
9	All Content	This tab has a list of all content that has been made available by all users
10	Table Headers	Content in My Content and All Content can be filtered by the headers. Click the upward and downward arrows to filter by any of the selections: Tag, RegSet, Content Type, Last Modified, Description, or Status .
11	Add New	Click Add New to add new content.
12	Actions	Click the Actions drop-down menu next to any content under My Content to Edit , Insert , or Delete content. The Actions drop-down menu under All Content only can be inserted or viewed.
13	x	Click to close the Content Library window

Table 35: Content Library Popup Window Detailed Callout

*These fields appear when **Show Advanced Search** is selected.

26.8.2 Click **Add New** in the **Content Library** window to add a new piece of content. The **New Content** window opens. See *Figure 274, New Content Pop-up Window* and *Table 36, New Content Popup Detailed Callout.*

< Return to Content Library 1			12 ×
New Content			
Provider Type 2		Survey Type	
Home Health Agency	~	Health	~
Regulation Set 4	Tag: 5		
Select one	Select	one	~
Publish Content	Content ୦ Finding	for 7 s O Deficient Practice Statement	
Description 8			
ਨ ੇ B I ⊻ ∷	v ∈ Σ	I.	
10 11 Save Save and Insert]		

Figure 274: New Content Pop-up Window

Table 36: New Content Popup Detailed Callout

No.	Name	Description		
1	Return to Content Library	Return to the Content Library window and cancel New Content.		
2*	Provider Type	Select the provider type from the drop-down menu.		
3*	Survey Type	Select the survey type from the drop-down menu.		
4*	Regulation Set	The regulation associated with the citation automatically appears. Click the caret to select a different regulation set from the drop-down menu.		
5*	Тад	The tag associated with the citation automatically appears. Click the caret to select a different tag from the drop-down menu.		
6	Publish Content	Check this box when the content created can be publicly accessed. This content will appear under <u>All Content</u> .		
7	Content Category	Select Findings or Deficient Practice Statement.		
8	Description	Type a description. This description is how the content can be found in the Content Library.		
9	Text Box	The content goes here. It can be typed or pasted in the box.		
10	Save	Click Save to save the content.		
11	Save and Insert	Click to insert the information in the text box into the Deficient Practice Statement (DPS) or the Findings. Save and Insert saves any changes made to the content and inserts the content in the DPS or Citations Findings and closes		
12	X	Click to close the Content Library window.		

*These fields are automatically generated but can be changed.

- 26.8.3 Insert, Edit, or Delete Information from the Content Library.
 - Note: Only content in My Content can be edited or deleted. Content from All Content can be viewed, inserted, or <u>duplicated</u>.
 - a. Open the Content Library.
 - b. Click **Insert** under the **Actions** menu to insert existing content. See *Figure 275, Content Library: Insert, Edit, Delete*.
 - c. Click Edit under the Actions menu to edit existing content.
 - d. Click Delete under the Actions menu to delete existing content.
 A pop-up window opens and asks for confirmation to delete.
 Once deleted, the content is deleted from My Content and All Content.

iter author,	in a second of a second of the second s	or keyword				
	regulation set the, description,	or keyword				
Show A	dvanced Search					
Search	Reset					
Search	Reset					
Search	Reset					
Search ly Conter	Reset					
Search ly Conter lag \$	Reset It All Content Regulation Set \$	Author ÷	Description 🗧	Published 🗘	Last Modified 🗘	
Search ly Conter Tag ‡ 30000	Reset nt All Content Regulation Set \$ HOME HEALTH AGENCIES	Author \$	Description \$	Published \$	Last Modified \$	Actions -

Figure 275: Content Library: Insert, Edit, Delete

26.8.4 Duplicate existing content

Purpose: Use **Duplicate** when there is existing content in **All Content** that you would like to use, but that may need to be edited.

- a. Click the All Content tab and search for content.
- b. Select **View** from the **Actions** drop-down menu. See *Figure 276, View Drop-Down Menu*.



Figure 276: View Drop-Down Menu

c. Click **Duplicate**. See *Figure 277, Duplicate*. The **Add New Content** window opens.

< Return to Content Library	
View Content	
Regulation Set	Тад
HOME HEALTH AGENCIES (ST - undefined - 12.01)	G0370 - Reporting OASIS information
Description	
Include the Tag Letter when displaying the Tag ID	
Default to the regulation set of the selected tag Default to the selected tag Test	
Insert Duplicate	

Figure 277: Duplicate

d. Make any desired changes.

- e. Click **Save** to save the document to **My Content**. See *Figure 278, Edit Duplicated Content.*
- f. Click **Save and Insert** to save the documents to **My Content** and insert the content into the DPS or the Findings.

rovider Type * Home Health Agency egulation Set * HOME HEALTH AGENCIES (FED - G - 12.01)	Survey Type * Health Tag * 0370 - Reporting OASIS information
Home Health Agency egulation Set * HOME HEALTH AGENCIES (FED - G - 12.01)	Health Tag * 0370 - Reporting OASIS information
egulation Set * HOME HEALTH AGENCIES (FED - G - 12.01)	Tag * 0370 - Reporting OASIS information
HOME HEALTH AGENCIES (FED - G - 12.01)	0370 - Reporting OASIS information
Publish Content	Content Category * Findings Deficient Practice Statement
COPY - Include the Tag Letter when displaying the Tag ID	
	- ×
Default to the regulation set of the selected tag Default to the selected tag Tests	ontent, if desired

Figure 278: Edit Duplicated Content

Note: Duplicated Content has COPY in the description. See Figure 279, Duplicated Content with COPY in Description. To remove the word COPY from the description, select Edit from the Actions drop-down menu and delete the word from the description.

My Conter	My Content All Content								
Tag 🗘	Regulation Set 🗘	Author ‡	Description \ddagger	Published $$$	Last $_{\hat{\uparrow}}$ Modified				
G0370	HOME HEALTH AGENCIES (ST - G - 12.01)	test2.CMSSingy	COPY - Include the Tag Letter when displaying the Tag ID	Yes	09/29/2022	Actions -			
G0370	HOME HEALTH AGENCIES (ST - G - 12.01)	test2.CMSSingy	COPY - Include the Tag Letter when displaying the Tag ID	Yes	09/29/2022	Actions -			
G0000	HOME HEALTH AGENCIES (ST - G - 12.01)	test2.CMSSingy	Violation of Cleanliness	No	09/28/2022	Actions -			

Figure 279: Duplicated Content with COPY in Description

26.9 Add an Attachment

Note: Only one attachment can be added at a time.

26.9.1 Click Attachments on the left menu on either the CitationOverview or Citations page. The Attachments window opens. See Figure 280, Attachments.

Attachments	
Add attachments for this citation and	add a file description below.
Select File	
Supported file formats PDF (.pdf), Word (.doc, .docx), Excel (.xls .wmv, .3gp), Audio files (.mp3, .aac, .wav, .wma), and Message f	i, xisx, .csv), Text files (.txt, .rtf), Image files (.jpeg, .jpg, .png, .tif, .tiff), Video files (.mp4, .mov, files (.msg, .eml).
Attachment name	
File Description	Optional: Type file description
Findings for J. Doe	
19/255 characters Save	

Figure 280: Attachments

- 26.9.2 Click **Select File**. The Windows Explorer window pops up. For Mac users, the Finder window pops up.
- 26.9.3 Select the file to be attached. Click **Open**. The file is attached and ready to be saved.
- 26.9.4 Type a file description in the **File Description** field, if desired.
- 26.9.5 Click **Save**. The file is attached to the Citation.

26.10 Conditions to Lock a Citation

The following conditions must be met to lock a citation:

- Refer to the Immediate Jeopardy section for locking citations with IJ
- All citation statuses are marked Writing Complete
- The survey has a start date and an exit date
- At least one survey extent (i.e., **Standard**, **Abbreviated**, or **Other**) is selected

- The **Citations ready to be locked** notification banner appears when all citation writing has been marked complete.
- Unlock the citation to add a new citation or edit a locked citation.

26.11 Lock/Unlock a Citation

26.11.1 Click Lock Citations on the Citations page. See *Figure 281, Citations Ready to be Locked*. The **Survey Extents** popup opens.



Figure 281: Citations Ready to be Locked

26.11.2 Click **View Survey Extents** to review or edit survey extents. See *Figure 282, Survey Extents Popup.*



Figure 282: Survey Extents Popup

26.11.3 Click **Continue**, to lock citations. The **Lock Citations** popup opens. See *Figure 283, Lock Citations*.



Figure 283: Lock Citations

26.11.4 Click **Lock** to lock citations. The **Citations** window opens and citations are locked.

- 26.11.5 Click **Unlock Citations** on the **Citations** window to unlock citations. See *Figure 284, Unlock Citations Pop-Up Window*. The **Unlock Citations** popup opens.
 - **Note**: A citation cannot be unlocked once a Revisit Survey has been started.



Figure 284: Unlock Citations Pop-Up Window

26.11.6 Click **Unlock Citations**. The **Citations** window opens, and citations are unlocked.

26.12 Merge Citation Findings

Note: Only the TC can merge citations.

26.12.1 Go to **Citations**. Verify that the **Citation Status** is **Ready for Merge**. See *Figure 285, Ready for Merge*.

Citation ID ≑	Regulation 🗘	Tag Type	Citation ÷	Authors	Actions
E0000 Initial Comments	Emergency Preparedness (FED - E - 1.01)	Memo	✓ I Writing Complete	Pat test2.SA.Andrea.Flori da	Actions -
E0001 Establishment of the Emergency Program (EP)	Emergency Preparedness (FED - E - 1.01)	Conditi on	C Ready for Merge	 Pat test2.SA.Andrea.Fl orida Pat test2.SA.Annie.Flor ida2 	Actions View/Merge Findings Add Findings Delete Citation
E0002	Emergency Preparedness (FED	Conditi	0	Pat	Actions -

Figure 285: Ready for Merge

- 26.12.2 Click View/Merge Findings on the drop-down menu under Actions. The Findings window opens. See *Figure 286, Findings.*
 - **Note**: Click arrows next to findings to rearrange the order of the findings. Once findings are merged, the order cannot be changed.



Figure 286: Findings

26.12.3 Click **Merge Findings**. The **Merge Findings** pop-up window opens. See *Figure 287, Merge*.

Merge Findings	×
Individual citation writing will no longer b after the findings are merged. Please con to merge the findings.	e editable firm you want
Merge Cancel	

Figure 287: Merge

26.12.4 Click **Merge**. The **Findings** window opens with the merged findings. See *Figure 288, Ready for Merge.*

Find	Findings *								
Merged Findings *									
в	i	<u>U</u>	Ē		≔				
mo	re impor	tant findi	ngs						
Thi	s is an ir	nportant	finding						

Figure 288: Ready for Merge

- 26.12.5 Update or edit findings, if desired. See *Figure 289, Findings*.
 - 26.12.5.1 Click **Edit Findings** to edit the findings. The **Citations Findings Status** automatically changes to **In Progress**.
 - 26.12.5.2 Click **Save Status** to save the edits. The **Citation Status** on the top menu is updated to **In Progress**.

26.12.6 Click **Save**.

- View Merged Findings under Citation Findings. Click Show Original Findings and the original findings open. Click Hide Original Findings to hide original findings.
- Only a TC or a QA Teams member can delete a merged citation.
- A merged citation can be edited to remove one of the merged citations.

FIN	dings	
Mer	ged Findings	
Pat te	st2.CMSSINGY Last Updated 1	1/05/2021 12:35 PM
more This	e important findings is an important finding	Updated Findings
_		
<u> ~ H</u>	ide Original Findings	Original Findings
<u>⊢</u>	ide Original Findings Pat test2.SA.Annie.Florida Writing Complete Last Up	Original Findings
>	ide Original Findings Pat test2.SA.Annie.Florida Writing Complete Last Up	Original Findings a2's Findings dated by Pat test2.5; Annie.Florida2 11/05/2021 12:23 PM

Figure 289: Findings

26.13 Create a Revisit Survey

- A revisit is required when there are federal condition level deficiencies.
- A revisit is recommended when there are federal standard level deficiencies or state licensure deficiencies.
- The revisit can be set to **Not Required** on the <u>Plan of Correction</u> for any noncondition level citations to override the revisit recommendation for standard or licensure deficiencies. The revisit survey is then updated so that the citations that are marked **No Revisit Needed** in the original survey do not carry over to the revisit survey.
- No Revisit Needed cannot be unchecked for federal standard level deficiencies associated with condition level citations that remain open.
- A follow up visit can be scheduled as necessary until all deficiencies are corrected.
- Confirm the following before creating a revisit survey:
 - All citations and findings have been added
 - The survey has an exit date
 - o Citations are locked
 - The Plan of Correction (POC) information is complete
- Once a revisit survey is created, it cannot be deleted. Contact the <u>iQIES Service</u> <u>Center</u> for help, if necessary.
- If carried-over citations have been corrected during the follow up visit, go to the <u>Plan of Correction</u> on the revisit survey and add the corrected dates.
- A revisit may not be necessary for all citations. Review <u>Create a Revisit Survey</u> <u>for Specific Citations</u> for what to do when all citations do not need to have a revisit survey created.
- All revisits can be seen back to the previous survey. See <u>View Older Revisit</u> <u>Surveys</u>.

26.13.1 Click **Survey action** on the gray survey bar and select **Create Revisit** from the drop-down menu. See *Figure 290, Create Revisit Drop-Down Menu*. The **Basic Information** page opens.



Figure 290: Create Revisit Drop-Down Menu

- Note: When citations are issued, a notification message appears in Citations and states: A revisit is required for this survey. A link to create a revisit survey is in the notification.
- 26.13.2 Update the page as necessary. Be sure to click **Save Basic** Information.

26.14 Create a Revisit Survey for Specific Citations

Purpose: To create a revisit survey for some, but not all, of the citations on a survey.

Notes:

- Once a revisit survey is created, it cannot be deleted. Contact the <u>iQIES Service</u> <u>Center</u> for help, if necessary.
- If a survey contains federal citations with condition-level tags, then all citations in the survey are carried over to the revisit survey. When this happens, all the **Needs Revisit** checkboxes will be checked and disabled (grayed out).
- Once a revisit survey is created, all the **Needs Revisit** checkboxes in the survey prior to the revisit survey are disabled and cannot be edited.

26.14.1 Go to the **Plan of Correction** page and scroll to **Corrective Actions**.

26.14.2 Each citation has a **Needs Revisit** column. See *Figure 291, Needs Revisit Column.*

	Note:	The	default	respons	e to N	eeds R	evisit is	Yes.
--	-------	-----	---------	---------	--------	--------	-----------	------

dates once the Plan of	Correction has been acce	Sort by:			
				Citation ID	
Citation ID	Immediate Jeopardy	Complete Date	Corrected Date	Correction Status	Needs Revisit
G0372 Encoding and transmit- ting OASIS	No	No information 🕦	No information 🛈	Not Corrected	Yes
Citation ID	Immediate Jeopardy	Complete Date	Corrected Date	Correction Status	Needs Revisit
G0374 Accuracy of encoded OASIS data	No	No information 🕦	No information (j)	Not Corrected	Yes
Citation ID	Immediate Jeopardy	Complete Date	Corrected Date	Correction Status	Needs Revisit
H0110 Hours of Operation	No	No information (j)	No information (j)	Not Corrected	Yes
Citation ID	Immediate Jeopardy	Complete Date	Corrected Date	Correction Status	Needs Revisit
H0111	No	No information ()	No information (i)	Not Corrected	Yes

Figure 291: Needs Revisit Column

26.14.3 Click **Edit All Actions**. The fields are now editable. See *Figure 292, Needs Revisit Editable Fields.*

orrective Actions	Correction has been accep	ted.			
Citation ID C2800 Applicability; Definitions	Immediate Jeopardy No	Complete Date (X5)	Corrected Date	Correction Status Not Corrected	Needs Revi
Citation ID G0372 Encoding and transmit- ting OASIS	Immediate Jeopardy No	Complete Date (X5)	Corrected Date	Correction Status Not Corrected	Needs Rev
Citation ID H0103 Accreditation	Immediate Jeopardy No	Complete Date (X5)	Corrected Date	Correction Status Not Corrected	Needs Rev
Save Cancel					

Figure 292: Needs Revisit Editable Fields

- 26.14.4 Uncheck the boxes under **Needs Revisit** for each citation that does not need to be corrected in a follow up visit.
- 26.14.5 Click **Save**.

26.15 View Older Revisit Surveys

26.15.1 Go to the latest revisit survey and click **Plan of Correction** on the left menu. Scroll down to **Corrective Actions**. See *Figure 293, Revisits Corrective Actions*.

Corrective Actions					Edit All Actions
Enter dates once the Plan of Co	rrection has been accepted.			Sort by: Citation ID	~
Citation ID G0372 Encoding and transmitting OASIS	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date No information ()	Correction Status Accepted	Needs Revisit Yes
Citation ID G0374 Accuracy of encoded OASIS data	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date No information ()	Correction Status Not Corrected	Needs Revisit Yes
Citation ID H0104 HHA Operational	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date	Correction Status Not Corrected	Needs Revisit Yes
Citation ID H0105 Unlicensed Activity	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date	Correction Status Not Corrected	Needs Revisit Yes

Figure 293: Revisits Corrective Actions

26.15.2 Click Edit All Actions.

26.15.3 Add the **Corrected Date** to any citations that have been corrected. See *Figure 294, Citation Corrected Dates.*

Citation ID G0372 Encoding and transmitting DASIS	Immediate Jeopardy No	Complete Date (X5) 03/01/2022 ()	Corrected Date 03/03/2022	Correction Status Accepted	Needs Revisit
Citation ID G0374 Accuracy of encoded OASIS data	Immediate Jeopardy No	Complete Date (X5) 03/01/2022 (j)	Corrected Date	Correction Status Not Corrected	Needs Revisit
Citation ID H0104 HHA Operational	Immediate Jeopardy No	Complete Date (X5) 03/01/2022 (j	Corrected Date	Correction Status Not Corrected	Needs Revisit
Citation ID H0105 Unlicensed Activity	Immediate Jeopardy No	Complete Date (X5) 03/01/2022 (j)	Corrected Date	Correction Status Not Corrected	Needs Revisit

Figure 294: Citation Corrected Dates
26.15.4 Click **Save**. The **Corrective Actions** are updated with a link to the original survey. See *Figure 295, Revisits Linked in Corrective Actions*.

26.15.5 Click the link to view details about the revisit survey.

Corrective Actions					Edit All Actions
Enter dates once the Plan of Co	rrection has been accepted			Sort by: Citation ID	~
Citation ID G0372 Encoding and transmitting OASIS	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date 03/03/2022 ① Survey 105A94-H2	Correction Status Corrected	Needs Revisit Yes
Citation ID G0374 Accuracy of encoded OASIS data	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date	Correction Status Accepted	Needs Revisit Yes
Citation ID H0104 HHA Operational	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date 03/03/2022 (i) Survey 105A94-H2	Correction Status Corrected	Needs Revisit Yes
Citation ID H0105 Unlicensed Activity	Immediate Jeopardy No	Complete Date 03/01/2022	Corrected Date	Correction Status Accepted	Needs Revisit Yes

Figure 295: Revisits Linked in Corrective Actions

27. Immediate Jeopardy

- Purpose: IJ is a situation in which the provider's noncompliance with one or more requirements of participation has caused or is likely to cause serious injury, harm, impairment, or death to a patient. Refer to the <u>Immediate</u> <u>Jeopardy Job Aid</u> for detailed information, including the IJ workflow.
- **Note**: See also <u>Add Immediate Jeopardy</u> button to add IJ in the LTCSP.
- **27.1** Add IJ to a citation.
 - 27.1.1 Add a citation. See <u>Citations</u> for more details.
 - 27.1.2 Click the Scope/Severity grid. See *Figure 296, Add IJ to a Citation*.

Add Citations Find and add citation tags for this survey.	Severity and Scope Grid		×
violation		Scope	Reset
Search by citation tag number, title, or keyword	[JKL	
15 Citations	Severity	GHI	All Tag Types ~
F0610 - Investigate/Prevent/Correct Alleged Vie LONG TERM CARE FACILITIES (FED - F - 20.00)		D E F A B C	° III Add
F0895 - Compliance and Ethics Program Requi	irement	Past No	oncompliance III Add
F0585 - Grievances Requirement LONG TERM CARE FACILITIES (FED - F - 20.00)		Past No	oncompliance III Add

Figure 296: Add IJ to a Citation

- 27.1.3 Select J, K, or L.
- 27.1.4 Click Add.
- 27.1.5 Click **Save**. The **Citations** window opens.
 - Note: A Statement of Deficiency can be generated with IJ, but the date sent, and a revisit survey cannot be created. Lock IJs bypasses this requirement and allows the citations not associated with IJ to move forward. All other citations must be updated.

- **27.2** Update any citations not associated with IJ. See <u>Add Findings</u>, if necessary.
- 27.3 Click Lock IJs. See Figure 297, Lock IJs. The Lock IJ Citations window opens.

Notes:

- The Lock IJs box highlights in solid red when all conditions have been met.
- All citations associated with the survey are locked. They can be unlocked once the SOD is generated with **Date Sent**.

Citations Add and manage citations tags	for this survey.					
Add Citation Mana	see Survey Categories	ions 🛈 Loc	(js		Download	lj Template
2 Citations		Filter by: LONG	TERM CARE FACILI	ITIES (FED - F - 20.00) 🗸 🗸	All Tag Types 🗸	All Authors $~~$
Citation ID 🗧	Regulation 🗧	Tag Type 🝦	Severity/ Scope	↓ Citation ↓ Status	Authors	Actions
F0554 Resident Self-Admin Meds- Clinically Approp	LONG TERM CARE FACILITIES (FEE - F - 20.00)	Requirement	D	 Writing Complete 	Pat NH_CMSGU_Sing У	Actions -
F0602 Free from Misappropriation/Exploitatio	LONG TERM CARE FACILITIES (FEE - F - 20.00) on	D Requirement	J-SQC	 Not Started 	No information	Actions -

Figure 297: Lock IJs

27.4 Click Lock as IJ. See *Figure 298, Lock IJ Citations Popup Window*. The Citations page opens, and a Statement of Deficiencies can now be generated with Date Sent.

Lock IJ Citat	ions	×			
Please confirm you want to lock all citations as Immedi- ate Jeopardy.					
Citations that ar they are, allowir dressed at a late the SoD for the o	Citations that are not IJ or memos will be locked as they are, allowing them to carry forward and be ad- dressed at a later revisit, and will be excluded from the SOD for the current survey.				
Lock as IJ	Cancel				

Figure 298: Lock IJ Citations Popup Window

- 27.5 Click Statement of Deficiencies on the left menu. The Statement of Deficiencies page opens.
- **27.6** Click Generate Form.
- 27.7 Check the CMS-2567 Federal Statement of Deficiencies box. The Statement of Deficiencies page expands to show additional fields. See *Figure 299, IJ Citation Check Box*.

Basic Information	Statement of Deficiencies	
Responsible Staff	Select preferred options for Statement of Deficiencies form.	
Manage Tasks	All required fields are marked with an asterisk (*)	
Teams	Statement of Deficiencies *	
LTCSP	CMS-2567 - Federal Statement of Deficiencies	
Survey Prep 🗸 🗸 🗸 🗸 🗸 V		
Initial Pool 🛛 🗸	Enderel Begulations	II Sumou
Investigation 🗸	 LONG TERM CARE FACILITIES (FED - F - 20.00) 	Include only IJ citations and memos
Resources 🕁		_
Citations	Format Options	
• Statement of Deficiencies	Include tag 9999	
ePOC (j)		
Informal Dispute Resolution	Download Form Cancel	
Independent Informal		

Figure 299: IJ Citation Check Box

27.8 Click the box next to **Include only IJ citations and memos** on the **Statement of Deficiencies** page. Only IJ citations are included on the SOD.

- When an IJ citation is locked, an SOD can be generated with **Date Sent** when the non-IJ citation status is **Citation Status** is **Not Started**.
- An SOD can be created, but it cannot be generated with **Date Sent** prior to locking citations.

28. Statement of Deficiencies

- **Purpose**: To issue CMS-2567 form when the survey or investigation identifies violations of federal regulations.
- **Note**: Citations must be complete, merged, and locked before CMS-2567 is completed.
- **28.1** Create the CMS-2567 form.
 - 28.1.1 Click **Statement of Deficiencies** on the left menu. The **Statement of Deficiencies** screen opens. See *Figure 300, Statement of Deficiencies*.
 - **Note: Edit** is not active for Statements of Deficiencies until the survey has an exit date.

Basic Information Responsible Staff Manage Tasks Teams	Statement of Def Generate the statement of define Generate Form	ficiencies ciencies and enter the date sent once the forr	n has been sent to the provider.	
LTCSP Survey Prep v Initial Pool v Investigation v Resources v Citations Statement of Deficiencies	Due to Provider No information	Date Sent No information	Due Back from Provider No information	Edit 🕕

Figure 300: Statement of Deficiencies

- 28.1.2 Click **Generate Form**.
- 28.1.3 Check the CMS-2567 Federal Statement of Deficiencies box. The Statement of Deficiencies page expands to show additional fields. See Figure 301, Statement of Deficiencies: CMS-2567 Selection.

- The LONG TERM CARE FACILITIES check box is automatically checked.
- Review the <u>Immediate Jeopardy</u> section prior to checking the IJ
 Survey check box.



Figure 301: Statement of Deficiencies: Preferred Options

28.1.4 Click **Download Form**. The **Statement of Deficiencies** form downloads.

- If the form does not show at the bottom of the screen, go to the **Downloads** folder on the computer.
- See <u>CMS-2567</u> example.
- **28.2** Edit the statement of deficiencies dates.
 - Note: The Statement of Deficiencies can only be edited when a survey has an exit date.
 - 28.2.1 Click Edit. See Figure 302, Statement of Deficiencies.

Statement	of Deficien	<mark>cies</mark>		
Generate the statement of deficiencies and enter the date sent once the form has been sent to the provider.				
Generate Form			×	
Due to Provider No information	Date Sent No information	Due Back from Provider No information	Edit	

Figure 302: Statement of Deficiencies

- 28.2.2 Type dates under **Date Sent** and **Due Back from Provider**, in a **MM/DD/YYYY** format. See *Figure 303, Statement of Deficiencies Edit Screen*.
 - **Note**: The **Due to Provider** date is automatically set to ten (10) days after the survey exit date.

Generate the statem form has been sent	nent of deficiencies an to the provider.	d enter the date sent once t
Generate Form		
Due to Provider	Date Sent	Due Back From Provider
08/04/2024	08/04/2024	08/14/2024

Figure 303: Statement of Deficiencies Edit Screen

28.2.3 Click Save.

							PRIM	ITED: 09/14/2022
DEPART	MENT OF HEALTH AND HUMAN	SERVICES					F	DRM APPROVED
	S FOR MEDICARE & MEDICARD	SERVICES	_	_			UN	IB NO. 0938-0391
STA	TEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLI IDENTIFICATION NUMBER:	IA	(X2) N	ULTIPLE CONSTRUCTION	(X3) D	ATE SURVE	Y COMPLETED
ANI	D PLAN OF CORRECTIONS		A. BUILDING					
				B. WIP	16	-		
Hour	OF PROVIDER OR SUPPLIER			1 Main St	Anutown Elorida 87960	E		
	of the realing out			i maili ot	, sugeown, rionau, or ooo			
(X4) ID PREFIX TAG	SUMMARY STATEMENT O (EACH DEFICIENCY MUST BE REGULATORY OR LSC IDENTI	PF DEFICIENCIES PRECEDED BY FULL FYING INFORMATION)	PI	ID REFIX TAG	PROVIDER'S PLAN OF COR (EACH CORRECTIVE ACTION CROSS-REFERENCED APPROPRIATE DEFICI	RECTIO SHOULI TO THE ENCY)	N D BE	(X5) COMPLETION DATE
G0000	INITIAL COMMENTS		G	0000				
G0370	Reporting OASIS information		G	0370				
	CFR(s): 484.45							
	Condition of participation: HHAs r electronically report all OASIS da accordance with	must ta collected in						
	§484.55.							
	This CONDITION is NOT MET as	s evidenced by:						
	This is for MichelleThis is for And didn't start this citation, but she c: Deficient Practice Statement incl what Andrea wrote here. (I delete edit")	reaMichelle an edit the uding deleting id, "Wow. I can						
	First findings recorded here by M	ichelle						
	Second findings recorded here by modifying the Deficient Practice S I cannot edit Andrea's findings be	y Michelle after Statement above, Jow.						
	We'll add more findings here. Mor This is Michelle, a member of the Findings on behalf of Andrea, The Coordinator, who is the only pers Team list. I deleted the findings.	re findings here. QA Tearn, writing a Tearn on on the Survey						
Any defice safeguar days follo following participal	iency statement ending with an as sprovide sufficient protection to to wing the date of survey whether o the date these documents are ma ion.	terisk (*) denotes a deficiency which he patients. (See reverse for further r not a plan of correction is provide de available to the facility. If deficien	ih ti r in: d. F ncie	he institution r structions.) E or nursing ho is are cited, a	may be excused from correcting p kcept for nursing homes, the findin mes, the above findings and plans n approved plan of correction is re	roviding it gs stated s of corre- quisite to	is determine above are d ction are dis continued p	ed that other lisclosable 90 closable 14 days rogram
LABORA	TORY DIRECTOR'S OR PROVIDE	ER/SUPPLIER REPRESENTATIVE	'S S	SIGNATURE	TITLE		(X6) DATE	
FORM C	MS-2567 (02/99) Previous Version	s Obsolete Even	nt IIC): E7E26-H1	Facility ID: IQ00000002521599	lf e	ontinuation	sheet Page 1 of 1

Figure 304: CMS-2567

29. Informal Dispute Resolution

- **Purpose**: To add or manage any informal dispute resolutions (IDR) in response to citations and to view the current survey citation status.
- **Note**: To create an IDR, the survey must have a status of Statement of Deficiencies Sent.
- 29.1 Click Survey action on the gray status bar and select Create Informal Dispute Resolution from the drop-down menu. See Figure 305, Create Informal Dispute Resolution Drop-Down Menu. The Informal Dispute Resolution page opens.



Figure 305: Create Informal Dispute Resolution Drop-Down Menu

29.2 Fill out the information.

Note: Click Select under List of Attendees for attendees.

29.3 Click Create Informal Dispute Resolution. The Informal Dispute Resolution page updates.

30. Independent Informal Dispute Resolution

Purpose: To add or manage any independent IDRs (IIDR) in response to citations and to view the current survey citation status and is conducted by a third party.

Notes:

The survey must have the following to have an IIDR:

- A status of Statement of Deficiencies Sent
- A scope/severity level of **D** or higher
- An enforcement case linked to the survey with a CMP that is in effect
- **30.1** Click **Survey action** on the gray status bar and select **Create Independent Informal Dispute Resolution** from the drop-down menu. See *Figure 306, Create Independent Informal Dispute Resolution Drop-Down Menu*. The **Independent Informal Dispute Resolution** page opens. See *Figure 307, Independent Informal Dispute Resolution.*



Figure 306: Create Independent Informal Dispute Resolution Drop-Down Menu

Independen Add and manage any ir	t Informal Disp	ute Resolution te resolutions (IIDRs) in response to citations.		Edit
Request for IIDR Rece No information	ived		Date Scheduled No information	
IIDR Status Requested				
Additional Doc Rec'd f	from Provider		Revised 2567 Date No information	
List of Attendees No information				
IIDR Notes No information				
Survey Citation	IIDR Status			₹ Filters
Citation	IIDR Status	Request Reason	Decision Reason	Action
E0001 See details	01-None -	00-Not Selected	01-No Change -	Undo Changes
F0540 See details	01-None -	00-Not Selected	01-No Change +	Undo Changes

Figure 307: Independent Informal Dispute Resolution

30.2 Click **Edit** to update the information. The fields become editable. See *Figure 308, Independent Informal Dispute Resolution Editable Fields.*

Independe	Int Informal Dispute by Independent Informal dispute resol	Resolution dions (IIDRs) in response to citations.		
Save IIDR an Save IIDR an Save IIDR an	d View Citations d View Allegations d View Enforcements			
Survey revent	ts citations to unlocked state following	any changes or additions to Citations. Citations, Enfor	cements, and Allegations should be updated and Citatio	ins locked again.
Request for IIDR Re	eceived *		Date Scheduled	
08/09/2024			08/09/2024	
IDR Status Conducted Withdrawn				
vdditional Doc Rec	ïd from Provider		Revised 2567 Date	
list of Attendees				
CMS Representative	e(s) × Resident/Family Member/Advoca	te \times Surveyor \times Administrator \times Select		×
DR Notes				
Survey Citatio	on IIDR Status			Filters Add Citation
Citation	IIDR Status	Request Reason	Decision Reason	Action
F0540	01-None -	00-Not Selected	01-No Change -	Undo Changes
E0001	01-None -	00-Not Selected •	01-No Change -	Undo Changes
Save Independe	ent informal Dispute Resolution	Cancel		

Figure 308: Independent Informal Dispute Resolution Editable Fields

- **30.3** Update the information.
 - Note: Click Filters to view IDR citation statuses by None, IIDR Request, No Change, Citation Added and Citation Changed. See Figure 309, IIDR Citation Filter.

Γ		Filters
F	Filters	A
	IDR Status	
	None	
a	IIDR Requested	U
Ľ	No Change	
а	Citation Added	U
Н	Citation Changed	-
	Submit	et

Figure 309: IIDR Citation Filter

30.4 Click Save Independent Informal Dispute Resolution. The Independent Informal Dispute Resolution page updates.

31. Plan of Correction (POC)

Purpose: To identify steps that must be taken, and time required to comply with regulation.

- For accepted POCs Both the **Provider Sign-off Date (X6)** and the **Received Date** are required.
- For rejected POCs New POCs can be entered until the status is **Accepted**. Only the most recent POC is available for viewing.
- Click Edit on the Plan of Correction page to make edits, if necessary.
- POC information is kept for the life of the survey.
- Citations must be locked before creating a POC.
- The **Due Date** is automatically populated to ten (10) days after the sent date as long as the Statement of Deficiencies **Date Sent** has been entered.

31.1 Plan of Correction

- **Note**: Citations must be added and locked before a plan of correction can be added.
 - 31.1.1 Click **Plan of Correction** on the left menu. The **Plan of Correction** screen opens. See *Figure 310, Plan of Correction*.

Manage Tasks			
Teams	Plan of Correction		
	Add and manage the status and dates	for the Plan of Correction (POC).	
LTCSP	All required fields are marked with an aste	risk (*)	
Survey Prep 🗸 🗸 🗸 🗸			
Initial Pool 🗸 🗸 🗸	Statement of Deficiencies Sent Date		
Investigation ~	08/02/2024		
Resources 🕁	Duo Date	Provider Sign off Date (V6)	Perceived Date
	08/12/2024	08/07/2024	08/07/2024
Citations	MM/DD/YYYY	MM/DD/YYY	MM/DD/YYYY
Statement of			
Deficiencies	Status *		
ePOC (j)			
Informal Dispute Resolution	Not Accepted		
Independent Informal			
Dispute Resolution	Dending Deview Date		
Plan of Correction			
CMS-1539	MM/DD/YYYY		
් CMS-670			
CMS-671			
CM3=071			
Letters	Save Cancel		
Notes			
Attachments			

Figure 310: Plan of Correction

31.1.2 Fill out the information.

Note: The Provider Sign-off Date (X6) and the Received Date are not required when the status is Not Accepted.

31.1.3 Click Save. The Plan of Correction page updates.

31.2 Waivers

- Waivers are for Life Safety Code surveys only.
- Only a CMSGU can change the decision on the waiver.
- Once a Waiver has been requested by the SAGU, an automatic email notification is sent to the CMS Responsible Staff to notify CMS staff of the waiver request. If there is no CMS Responsible Staff, no email will be sent.
- After the waiver decision is made in iQIES by CMS, an automatic email is sent to the SAGU stating a waiver decision has been made. If there is no SAGU staff, no email will be sent.
- Be sure to have a CMS Responsible staff and a State Agency Responsible staff.
- A waiver cannot be added to a citation with the **Immediate Jeopardy** tag.
- 31.2.1 Click the caret next to the **Citation ID & Building ID** on the **Plan of Correction** page under **Corrective Actions** to view waiver details. See *Figure 311, Citation ID & Building ID.*

Citation ID & Building ID	Severity/Scope	Complete Date	Corrected Date	Correction Status	Needs Revisit
K0131 - 12 Multiple Occupancies	E	12/21/2023	No information (j)	Accepted	Yes
Waiver					
Temporary					
Туре		Request Date		Sent to CMS	
Federal		10/04/2023		10/04/2023	
Last Day in Effect		Decision		Decision Date	
12/20/2023		Pending		No information	
Building Waiver Detail					

Figure 311: Citation ID & Building ID

31.2.2 Click **Edit All Actions** on the **Plan of Correction** page to enter corrective action information, including waiver details. See *Figure 312, Edit All Actions.*



Figure 312: Edit All Actions

31.2.3 Click the drop-down menu under **Waiver** to change the waiver status. See *Figure 313, Waiver Selections.*

Note: Grayed out areas can only be updated by a CMS General User.

Citation ID & Building ID K0111 - B1 Building Rehabilitation	Immediate Jeopardy No	Complete Date (X5)	Corrected Date	Correction Status Not Corrected	Waiver Continuing V
Туре		Request Date *		Sent to CMS	
Federal		✓ 04/13/2022			
Last Day In Effect		Decision		Decision Date	
		Pending		~	
Building Waiver Detail					Text Editor Keyboard Shortcuts
B i U 🗉	i≡ :≡				
Needed some extra time					
itation ID & Building ID	Immediate leopardy	Complete Date (X5)	Corrected Date	Correction Status	Waiver

Figure 313: Waiver Selections

- 31.2.4 Add building details, if desired.
- 31.2.5 Click **Save**.

Note: A revisit survey can now be made for the LSC survey.

32. Letters

- Purpose: To add, upload, generate a letter from an existing template, edit a Letter Overview, delete a letter, or add recipients to a letter. Nonstandardized templates can be edited in the Letters section of the applicable S&C area (providers, surveys, intakes, enforcements).
- **Note**: Letter templates are created in the Letter Template Management section. Review <u>S&C User Manual: Letter Template Management</u> for more information.

32.1 Add/Upload a letter

32.1.1 Click **Letters** on the left menu to go to **Letters**. See *Figure 314, Surveys Letters*.

	Letters
Basic Information	Add and manage the letters for this survey, by uploading letters or generating letters from available templates.
Responsible Staff	
Teams	Add Letter
Citations	
Citations	There are no letters for this survey.
Statement of Deficiencies	
Informal Dispute Resolution	
Plan of Correction	
CMS-1539	
CMS-1572	
CMS-670	
Letters	

Figure 314: Surveys Letters

32.1.2 Click **Add Letter**. The **Letter Overview** window opens. See *Figure 315, Providers Letter Overview*.

Letter Overview	
All required fields are marked with an asterisk (*)	
Letter Name *	
0/255 characters	
Letter Description	
0/255 characters	
Status	
Select one	
Federal / State Licensure Federal State Licensure	
Letter Category	
Select 🔶	
Save Cancel	

Figure 315: Providers Letter Overview

- 32.1.3 Fill out the information.
- 32.1.4 Click **Save**. The information updates in a new screen. See *Figure 316, Letter Attachment and Recipient*.

< Return to Letters	< Return to Letters					
Letter: Test Letter 2						
Overview						
Description	test letter					
Status	Draft					
Federal/State Licensure	Federal					
Date Created	10/04/2021 5:33 PM					
Letter Category	Request POC					
Attachments Upload Letter Generate from template There are no attachments for this letter.						
Recipients	Recipients					
Add Recipient						
There are no recipients for this letter. Delete Letter Delete Letter						

Figure 316: Letter Attachment and Recipient

- 32.1.5 Scroll down to **Attachments**. Click **Upload Letter** to upload a letter from the computer.
- 32.1.6 Click **Select File**. The Windows Explorer window pops up. For Mac users, the Finder window pops up.
- 32.1.7 Select the file to be attached. Click **Open**. The file is attached and ready to be saved.
- 32.1.8 Type a file description in the **File Description** field, if desired.
- 32.1.9 Click **Save**. The letter is attached to the survey.

32.2 Generate a letter from an existing template

- 32.2.1 Click Add Letter. The Letter Overview page opens.
 - Note: If there is already an existing letter that can be reused, click Generate from template under the Actions drop-down menu and go to step 32.2.5.
- 32.2.2 Type the letter name under **Letter Name**. Add additional information, if desired.
- 32.2.3 Click Save. The Letter: [Template Name] page opens.
- 32.2.4 Click **Generate from template** under **Attachments**. See *Figure 317, Generate from Template*. The **Add Letter** page opens.

Attachments	
Upload Attachment	Generate from template

Figure 317: Generate from Template

32.2.5 Click the circle next to the desired template. See *Figure 318, Add Letter Template*.

Add Letter Select a template. 8 Letter Templates	Cancel Next Filter by keyword Q	
Letter Template Name	Description 🔅	Standardized 🗧
O Andrea's Test Template	Demo	No
Ben Test Provider	test	No

Figure 318: Add Letter Template

- 32.2.6 Click Next. The Generate attachment from template page opens.
- 32.2.7 Update the template as desired. See *Figure 319, Letter Template*. **Notes**:
 - The template can be modified. Textholders can be removed, words can be edited and updated. Refer to <u>Appendix B, Survey</u> <u>Textholder Text</u> for a list of textholders. Be aware that the text changes apply only to the current letter and not to the template. Refer to the <u>Letter Template Management User Manual</u> on QTSO to edit the original template.
 - Standardized templates cannot be modified in the Letters section of any S&C area (providers, surveys, intakes, enforcements). To modify a standardized template, the template owner must edit the template in Letter Template Management.



Figure 319: Letter Template

- 1. **Print Preview**: Click Print Preview to preview the .pdf version of the letter. The letter can be downloaded from Print Preview, if desired.
- 2. File Name: Edit the name, if desired.
- 3. **Description**: Enter keywords, if desired. Keywords are descriptive words that help the user find the content. For example, the template title might be "Unsubstantiated Claim," and the key words could be federal, minor. Separate the keywords with a comma.
- Formatting: The format menu allows content to be edited, including formatting, bulleting, etc. See <u>Appendix B, Tips and Tricks for Working in</u> <u>a Template</u>, for up-to-date details on each icon in the menu.
- 5. **Letter**: Shows how the letter looks. Verify inputs. Make any changes for nonstandardized templates, if desired.
- 6. **Generate attachment**: Click **Generate attachment** to create a .pdf that attaches to provider/survey/intake/enforcement record.

- 32.2.8 Click Generate Attachment to attach the letter to the record.
- 32.2.9 Verify the letter is attached under **File Name**. See *Figure 320, Letter Attachment*.

Attachments			
Upload Letter Gene	rate from template		
1 Letter Attachment			
File Name 🗧	Date Uploaded 🗘	Description \ddagger	Actions
The Andrea Template	10/15/2021 11:06 AM	No information	Edit Delete

Figure 320: Letter Attachment

32.3 Add recipients to a letter

32.3.1 Click **Add Recipient** to add a recipient. The Add Recipient page opens. See *Figure 321, Add Recipient*.

Add Recipient		
All fields are optional. Complete at least one field to save.		
First Name	Last Name	
Address 1	Address 2	
City	State	7IP Code
		Zir Code
	Select one	
Email		
Letter Information		
Date Sept		
Date sent		
Sender		
Method		
Select one		
Tracking ID		
Receipt acknowledged		
Save		

Figure 321: Add Recipient

- 32.3.2 Fill out the information.
- 32.3.3 Click Save. The Recipient Information updates.

32.4 Edit a Letter Overview

32.4.1 Click **Edit Overview** from the **Actions** drop-down menu to edit a Letter Overview. See *Figure 322, Edit a Letter Overview*. The **Edit Letter Overview** opens. See *Figure 323, Edit Letter Overview*.



Figure 322: Edit a Letter Overview

Edit Letter Overview				
All required fields are marked with an asterisk (*)				
Letter Name *				
Test Letter				
11/255 characters				
Letter Description				
0/255 characters				
Status				
Select one				
Federal / State Licensure				
 Federal 				
State Licensure				
Letter Category				
All × Select				
Save Cancel				

Figure 323: Edit Letter Overview

- 32.4.2 Update fields.
- 32.4.3 Click Save.

32.5 Delete a Letter

32.5.1 Click **Delete Letter** from the **Actions** drop-down menu to delete a letter. A pop-up note opens. See *Figure 324, Delete Letter Pop-Up Window*.



Figure 324: Delete Letter Pop-Up Window

32.5.2 Click **Delete**. The letter is removed from the list.

33. Notes

Purpose: To add or review any notes.

- Note:Notes added here are intended for the survey in general. Please seeSurveyor Notes, Initial Pool Notes, Facility Task Notes, ObservationNotes, Resident Notes for detailed information about those notes.
- **33.1** Click **Notes** on the left menu to view existing notes or add a note. See *Figure 325, Add Note*.

≡	Home / La Maison Suisse Deux / Survey 1A6456-H1			
Survey 1A6456-H1 La Maison Suisse Deux CCN 10A518	Status Category Writing in progress Initial Certification	Start Date Exit Date Revisit Status 05/14/2024 05/14/2024 Not Determined	Track Status 1A6456 0%	Survey action +
Nursing Home Basic Information	Add Note			Text Editor Keyboard Shortcuts 17
Responsible Staff Manage Tasks	B i U ⊒ ⊫ ≔			
Teams				
LTCSP				
Initial Pool v				
Investigation ~ Resources 😃				
Citations	Pawarad by Froata			
Statement of Deficiencies				
ePOC ()	Save			
Informal Dispute Resolution				
Dispute Resolution Plan of Correction				
ු CMS-1539				
ି CMS-670 ି CMS-671				
Letters				
Attachments				

Figure 325: Add Note

- **33.2** Type notes in blank field.
- **33.3** Click **Save**. The **Notes** window opens with note information. See *Figure 326, Notes.*

Notes Add and manage the notes for this survey.	
Add Note	
Pat NH_SAGU_Admin_Singy 05/22/2024 6:00 PM Note added	Delete Edit
Important survey notes.	

Figure 326: Notes

- **Note**: Click **Edit** to edit information, if desired. It is not possible to edit or delete a note created by another user.
- **33.4** Click **Delete** to delete a note. A pop-up note opens. See *Figure 327, Delete Note Pop-Up Window.*

		×
Please confirm you want to delete this note.		
Delete	Cancel	

Figure 327: Delete Note Pop-Up Window

33.5 Click **Delete**. The updated **Notes** page opens.

34. Attachments

Purpose: To add copies of images and letters to a survey.

- Only one attachment can be added at a time.
- Attachments cannot be deleted. Contact the <u>iQIES Service Center</u> to delete any attachments.
- **34.1** Click **Attachments** on the left menu. The **Attachments** window opens. See *Figure 328, Attachments*.



Figure 328: Attachments

User Manual

- **34.2** Click **Select File**. The Windows Explorer window pops up. For Mac users, the Finder window pops up.
- **34.3** Select the file to be attached. Click **Open**.
- **34.4** Type a file description in the **File Description** field, if desired.
- 34.5 Click Save. The file is attached to the survey. See Figure 329, Attachment.

Attachments	
Add and manage the attachments for this survey.	
Add Attachment	
1 Attachment	
CMSlogrebr2colCMYKplain.tif	Edit
Date Uploaded	05/22/2024 6:08 PM
Date Published	No information
Uploaded By	Pat NH_SAGU_Admin_Singy
File Size	672 KB
Category	Survey
Source	Survey 1729622
🕞 Publish to Provider 🔄 보 Download	

Figure 329: Attachment

- **34.6** Click **Add Attachment** to add additional attachments.
- **34.7** Click **Edit** to edit the attachment. The file can be deleted, or the description can be edited.
- **34.8** Click **Publish to Provider** to publish to the provider. The **Publish to Provider** link then shows as **Unpublish to Provider**. See *Figure 330, Unpublish To Provider*. Click again to toggle.

1 Attachment		
CMSlogrebr2colCMYKplain.tif		
Date Uploaded	05/22/2024 6:08 PM	
Date Published	05/22/2024 6:24 PM	
Uploaded By	Pat NH_SAGU_Admin_Singy	
File Size	672 KB	
Category	Survey	
Source	Survey 1729622	
× Unpublish to Provider		

Figure 330: Unpublish To Provider

34.9 Click **Download** to download the attachment.

35. Survey Closed Status

Purpose: To close the survey once it is completed and all necessary corrections have been made.

- **35.1** Go to **Basic Information** page. Click **Edit**. The **Basic Information** page can now be edited.
- **35.2** Click **Closed** under Survey Status. See *Figure 331, Survey Status*.

Survey Status	
Start Date 🛈	Exit Date (i)
09/23/2021	10/04/2021
MM/DD/YYYY	MM/DD/YYYY
Survey Status * Open Closed	
Save Basic Information	Cancel

Figure 331: Survey Status

Note: Be sure the Exit Date is completed.

- 35.3 Click Save Basic Information. The Basic Information page updates.
- **35.4** Verify that **Survey Status** is **Closed**.

Appendix A: Tips and Tricks for Working in a Template

The letters template is very similar to working in Google Docs or Microsoft Word. See *Figure 332, Letter Template Format Menu for* a few tips and tricks to help.

Template Menu



Figure 332: Letter Template Format Menu

- 1. Show HTML code
- 2. Put document in full screen (make it bigger)
- 3. Undo/Redo
- 4. Insert an image. A small **Drop image** box opens. Drag and drop a file or click the box and search for the file.
- 5. Insert a table
- 6. Insert a horizontal line
- 7. Insert a page break
- 8. Highlight text and click to make **bold**
- 9. Highlight text and click to *italicize*
- 10. Highlight text and click to underline
- 11. Clear formatting
- 12. Highlight text and click to change text color
- 13. Highlight text and click to highlight text
- 14. Create a numbered list
- 15. Create a bulleted list
- 16. Insert a checklist
- 17. Indent/Remove indent
- 18. Alignment: Left, Center, Right, Justified
- 19. Adjust the line height
- 20. Select a font
- 21. Select a font size
- 22. Help: shows handy shortcuts, keyboard navigation, plugins, and version

Appendix B: Survey Textholder Text

Each provider, survey, intake, and enforcement area has area-appropriate textholders. See *Table 37, Survey Textholders*.

Table 37: Survey Textholders

Survey Textholders			
Accrediting Organization (AO)	IDR Conducted By	Provider Type Full Description	
Admin 1 st Name	IDR Conducted Date	Provider Zip	
Admin Full Name	IJ Citations	Revisit-Corrected Tags	
Admin Last Name	Letter Sent Date	Revisit-List New Tags	
Admin Salutation	List Intakes For This Survey	Revisit-List Repeat Tags	
Admin Short with Salutation	List Level A Cites (Disabled for HHA)	SQC Highest Grid Text	
Admin Title	List Survey Team	SQC Notification	
Administrator Email	List Tag Numbers Only	Start Date (Numbers)	
Building ID List	List Tag/Surveyor Test	Start Date (Words)	
Buildings List	List Tags Cited	State Survey Categories	
Buildings List Open	Medicaid ID Number	Survey All Tags IDR Status	
Custom Text Prompt	Observation Text (9999)	Survey Extent(s)	
Date # Days after Exit Date (Numbers)	POC Due Date	Survey High Citations	
Date # Days after Exit Date (Words)	POC Due Date in Words	Survey Purpose	
Date # Days after Start Date (Numbers)	Provider Address 1 (Street)	Survey Regulation Type	

Survey Textholders			
Date # Days after Start Date (Words)	Provider Address 2	Survey Revisits	
Date CMS-2567 Issued	Provider CCN	Survey Revisits – Dates Only	
Date IDR Request Received	Provider City	Survey Team Leader	
Event ID	Provider Doing Business As Name	Survey Type	
Exit Date (Numbers)	Provider Fax Number	Tags above S/S C	
Exit Date (Words)	Provider Full Address	Tags with SQC	
Exit Date + 6 Months (Numbers)	Provider Legal Name	Third Visit Date	
Exit Date + 6 Months (Words)	Provider Mailing Address	Title (Mapped from Provider Certification & Licensure tab)	
Federal Survey Categories	Provider State	Today's Date	
First Revisit High Citations	Provider State ID (FACID)	Today's Date Full	
First Revisit High Cite S/S	Provider State License Number	Waived Tags of Survey	
Highest Grid Text	Provider Telephone		
Highest Scope/Severity (Disabled for Home Health Agencies (HHA))	Provider Type Abbrev		