



Centers for Medicare & Medicaid Services

Internet Quality Improvement & Evaluation System (iQIES)

Survey and Certification (S&C) Manage an Intake User Manual

Version 3.2

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1. Introduction

This user manual addresses how to view and add a new intake, including involved parties, allegations, and responsible staff. Review the workflow in the next section to understand how the intake process works.

For information on other modules, refer to [Reference & Manuals](#) 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 <https://iqies.cms.gov/> with [HARP](#) (Health Care Quality Information Systems (HCQIS) Access Roles and Profile) login credentials. Refer to [iQIES Onboarding Guide](#) 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*.

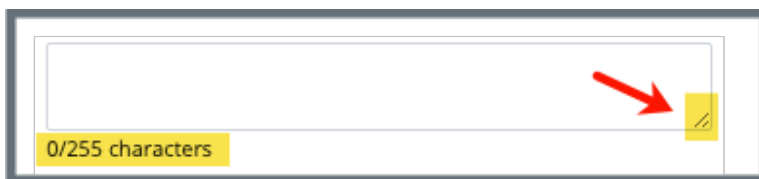


Figure 1: Expandable Field

- iQIES times out after 30 minutes of nonuse and reverts to the login page.
 - iQIES remains up and active as long as it is in use.
 - iQIES gives a five-minute warning before timing out.
 - The session resumes at the last accessed page after reauthentication.
 - Be sure to save data regularly. Pages that require saving are noted in this document and have a **Save** button on the page.
- 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.

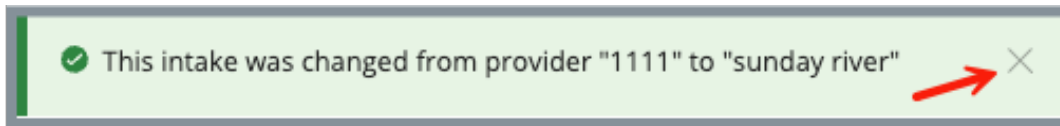


Figure 2: Notification Banner

Table 1: Notification Banner Color Descriptions

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.

- 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*.

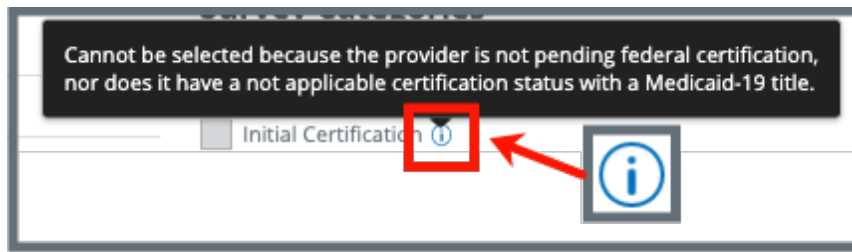


Figure 3: Tool Tip Icon

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

[Chrome](#)

[Edge](#)

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 Security Official (SO) for your organization

Technical Support: Contact the iQIES Service Center:

Phone: 888-477-7876 (select Option 1)

Email: iQIES@cms.hhs.gov

CCSQ Support Central: Create a new ticket or track an existing ticket:
https://cmsqualitysupport.servicenowservices.com/ccsq_support_central

Idea Portal: Feedback for future iQIES software development: [CCSQ Support Central](#). Click **Idea Portals** and select **iQIES Idea Portal**.

More information on iQIES: Refer to the [QIES Technical Support Office](#) (QTSO) and the [Quality, Safety, & Education Portal](#) (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 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 SO for your organization or the iQIES Service Center for issues relating to access and permissions. Refer to the [iQIES User Roles Matrix](#) for detailed information on roles.

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



Figure 4: Help Icon

1.4 My Tasks

Purpose: **My Tasks** 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.

Note: **My Tasks** is limited to the State Agency General User and CMS General User roles.

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.

The screenshot shows the 'My Tasks' interface. At the top, there's a navigation bar with 'Providers', 'Surveys', 'Intakes' (highlighted with a red box and letter 'a'), and 'Enforcements'. Below this, the 'My Intakes Tasks' section is visible. It includes a toggle for 'Expand All Tasks' (letter 'b') and a dropdown menu currently set to 'Active tasks'. The main table has columns: 'Intake ID' (letter 'c'), 'Provider' (letter 'd'), 'Status' (letter 'e'), 'Priority' (letter 'f'), 'Survey Due Date' (letter 'g'), 'Intake Start Date' (letter 'h'), and 'Assigned Tasks' (letter 'i'). A sample row shows 'Complaint 1163642' from 'House of the Rising Sun27' with status 'Triage/Prioritization'. Below this, an 'ASSIGNED TASK' section (letter 'j') lists tasks: 'Finalize', 'Letters', and 'Prioritization', each with a 'DUE DATE' and a 'TASK STATUS' dropdown (all set to 'To Do'). A 'COMMENTS' column (letter 'k') is on the right, showing icons for adding comments.

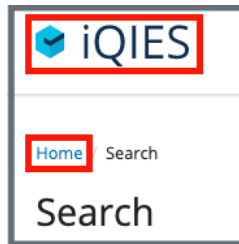
Figure 5: My Tasks Landing Page

Table 2: My Tasks Landing Page Detailed Callout

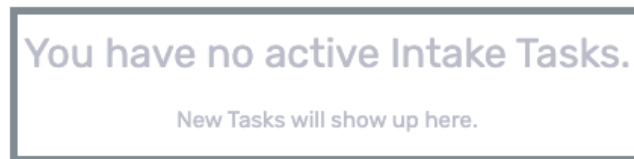
No.	Name	Description
a	Intakes tab	Click each available tab (Providers, Surveys, Intakes, Enforcements) to review the respective tasks. Not all tabs are available in all user roles. Click Enable Offline to enable the survey offline. For more details on how to enable offline, refer to S&C User Manual: Offline .
b	Expand All Tasks	This checkbox defaults to checked so users can see tasks assigned to them. Uncheck box to close task detail.
c	Intake ID	The intake ID shows as a link directly under Intake ID . Click the link to go directly to the Intake Basic Information page. Click the caret next to the intake ID to view task status details about the intake. See step 1.4.2.
d	Provider	The provider ID and address show as a link directly under Provider . Click the link to go directly to the Provider Basic Information page.
e	Status	Shows the status of the intake .
f	Priority	Shows the priority level of the intake
g	Survey Due Date	Shows the due date of the survey
h	Intake Start Date	Links the starting date of the intake
i	Assigned Tasks	Lists the assigned tasks, if any.
j	ASSIGNED TASK	Shows tasks in detail assigned to the user.
k	Notes	Click the + to add a note. See step 1.4.3 .

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*.

*Figure 7: No Active Tasks*

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

Complaint 1163642 Enable Offline	House of the Rising Sun27 123 Main St Nowhereville, Florida 99890	Triage/Prioritization	No information	No information	11/29/2024	Finalize, Letters, Prioritization
ASSIGNED TASK	DUE DATE	TASK STATUS	COMMENTS			
Finalize	No information	To Do	Existing Comment			
Letters	07/11/2025	To Do	No Comment			
Prioritization	07/14/2025	To Do				

Figure 8: Task Status Details

Table 3: Task Status Details Detailed Callout

No.	Name	Description
a	ASSIGNED TASK	The name of the task assigned.
b	DUE DATE	The date the task is due, if available.
c	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 step 1.4.3 .

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

1A6456-H1 Letters

Existing comments are here with date, time, user noted

PN Pat NH_SAGU_Admin_Singy 05/23/2024 • 3:14 PM ...

We are waiting to finish this task until the Memorial Holiday is over.

New comments can be typed here.

Save Cancel

Figure 9: My Tasks Comments

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

2. Manage an Intake Overview

This manual explains how to manage intakes, from adding or searching for an intake, to intake statuses, adding Responsible Staff, parties involved, allegations, triage, adding a survey, linking an intake, changing a provider, and the investigation narrative.

The intake workflow shows how the intake process works from start to finish. See *Figure 10, Intake Workflow*. The intake status in iQIES is shown on the left for each step of the process. Review [Intake Statuses](#), for details on each status.

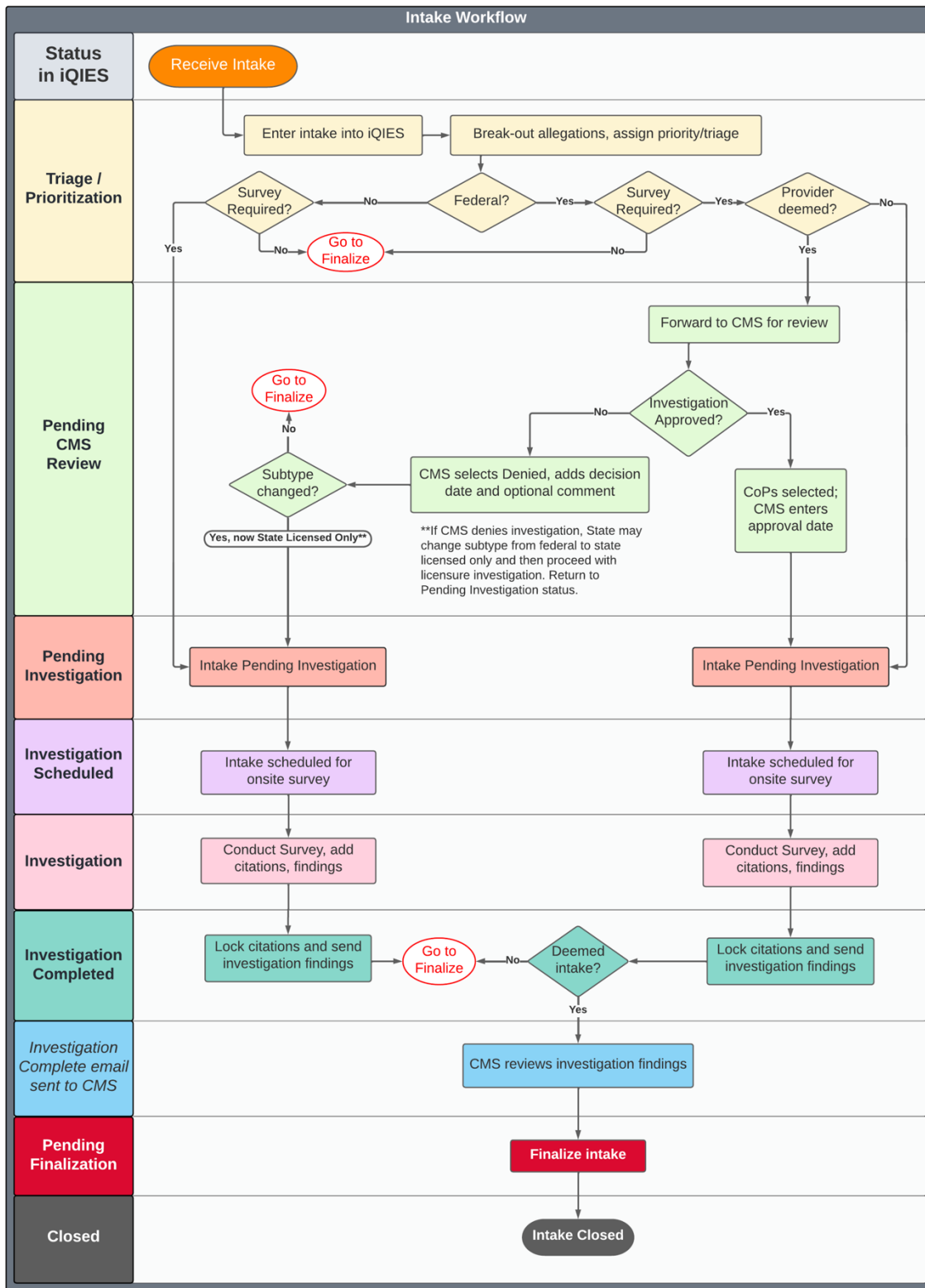


Figure 10: Intake Workflow

3. Intake Statuses

There are nine statuses for intakes. Each status shows where the intake process is in the workflow. Review the status on the gray bar. See *Figure 11, Intake Status*.

No Investigation	No investigation reason is available, and triage is disabled and set to complete.
Triage/Prioritization	Intake is entered and no priority assigned
Pending CMS Review	Deemed intakes that require a survey and pending approval by CMS to conduct an onsite investigation Status not applicable for Nursing Home providers
Pending Investigation	Triaged intakes that require a survey, but no survey is linked
Investigation Scheduled	Intake is linked to a survey record where survey status is New
Investigation	Linked survey that has at least 1 citation added
Pending Finalization	State finalization step. Contains intakes where no survey is required, or intakes where a survey was conducted and the Statement of Deficiencies Date Sent has been updated.
Investigation Completed	Citations in linked survey are locked
Closed	Enter date SAGU completed all activities related to the intake

Home / Search / 0 Worry HealthCare Sytems / Complaint 244834			
Complaint 244834			
0 Worry HealthCare Sytems - CCN 10K087 - HHA - Deemed			
Intake Status Pending CMS Review	Priority Immediate Jeopardy	Intake Start Date 03/22/2021	Primary Complainant No information

Figure 11: Intake Status

4. Search for an Intake

Purpose: To search for an enforcement.

Note: Search CLIA Intakes from the CLIA **Search** page. Select **CLIA Search** from the top menu, and then select the **CLIA Intakes** tab.

- 4.1 Go to **Survey & Certification** at the top of the iQIES home page. Click the arrow to open the drop-down menu.
- 4.2 Click **Search**. The **Search** window opens.
- 4.3 Click the **Intakes** tab on the **Search** page. See *Figure 12, Intakes Search Page*.

Figure 12: Intakes Search Page

Note: Click **Show Advanced Search** for a more detailed search. Refer to [Advanced Search](#) for details.

- 4.4 Select **Intake ID** or **ASPEN ID**, **CCN**, or **Provider Name** from the drop-down menu under **Search for Intakes**.

Notes:

- ASPEN is the legacy system.
- Intakes created in iQIES do not have an ASPEN ID. See *Figure 13, Intake Created in ASPEN*.

VA ASC 1 Jeff Fuqua Blvd, Mailing Address Test, Orlando, FL 32827 FACID IQ00000002769885 ASC	508264	Complaint
VA ASC 1 Jeff Fuqua Blvd, Mailing Address Test, Orlando, FL 32827 FACID IQ00000002769885 ASC	Intake created in ASPEN → 487353 ASPEN 112255	Complaint
Matt. H. ASC 123 Fake St, Fake, FL 00000 FACID IQ00000002755422 ASC	Intake created in iQIES → 472529	Complaint

Figure 13: Intake Created in ASPEN

- There are existing intakes with ASPEN IDs that were created in ASPEN and are still in use
- **Basic Information** about the intake only shows an ASPEN ID if there is one available. See *Figure 14, Basic Information ASPEN ID*.

Basic Information

Intake Type
Complaint

Intake Subtype
Federal CoPs, CFCs, RFPs, EMTALA

Intake Method
No information

Intake Start Date / Time
05/16/2022 7:21 PM

Tracking ID
No information

ASPEN ID
112255

Sources
No information

Summary of Complaint
test

Only shows when
the intake was
created in ASPEN

Figure 14: Basic Information ASPEN ID

- 4.5 Type search criteria.
- 4.6 Click **Search**. The intake information shows below.
- 4.7 Click the intake ID to open the intake. The **Complaint** or **Incident Basic Information** window opens.
- 4.8 Click **Show Advanced Search** to open the **Advanced Search** drop-down menu and narrow the search criteria. See *Figure 15, Intakes Advanced Search*.

Note: Click **Hide Advanced Search** to close the **Advanced Search** menu.

Search for Intakes

Intake or ASPEN ID ▾ Search

▾ Hide Advanced Search

TYPE

Intake Subtype

Select... ▾

Select one or more

STATUS

Intake Status

Select... ▾

Select one or more

Triage Priority

Select... ▾

Select one or more

PROVIDER INFO

Provider Type

Select... ▾

Select one or more

State

Select... ▾

Select one or more

Search **Reset**

Figure 15: Intakes Advanced Search

5. Search for Intake Parties

- 5.1 Go to **Survey & Certification** at the top of the iQIES home page. Click the arrow to open the drop-down menu.
- 5.2 Click **Search**. The **Search** window opens.
- 5.3 Click the **Intake Parties** tab on the **Search** page. See *Figure 16, Intake Parties Search Page*.

Search

Providers Surveys Intakes Enforcements CMPTS Cases **Intake Parties**

Search for Parties Involved

Parties Involved ▼ Search

> [Show Advanced Search](#)

Search Reset

- ✓ Parties Involved
- Intake or ASPEN ID
- CCN
- Provider Name

Figure 16: Intake Parties Search Page

Note: Click **Show Advanced Search** for a more detailed search. Refer to [Advanced Search](#) for details.

- 5.4 Select **Parties Involved**, **Intake or ASPEN ID**, **CCN**, or **Provider Name** from the drop-down menu under **Search for Parties Involved**.
- 5.5 Type search criteria.
- 5.6 Click **Search**. The intake parties information shows below, including the **Parties Involved** and the **Intake ID**. See *Figure 17, Search Results*.

Search

Providers Surveys Intakes Enforcements CMPTS Cases **Intake Parties**

Search for Parties Involved

Parties Involved ▼ Bad Guy

> Show Advanced Search

Search Reset

1 - 10 of 41 Parties Involved

Parties Involved	Date of Birth	Intake ID	Type	Subtype	Priority	Status	Involvement
Guy, Bad Katelyn NH Provider	No information	1145583	Complaint	Federal CoPs, CFCs, RFPs, EMTALA	Non-Immediate Jeopardy-Medium	Investigation Scheduled	Alleged perpetrator
Really Bad, Guy Bunker NH Test Provider	No information	723046	Complaint	Federal CoPs, CFCs, RFPs, EMTALA	Non-Immediate Jeopardy-High	Closed	Person affected

Figure 17: Search Results

- 5.7 Click the links within the search results to view detailed information.
 - a. Click the highlighted name under **Parties Involved** to view the **Alleged Perpetrator** page.
 - b. Click the intake ID to open the intake. The **Complaint or Incident Basic Information** window opens.

- 5.8 Click **Show Advanced Search** to open the **Advanced Search** drop-down menu and narrow the search criteria. See *Figure 18, Intake Parties Advanced Search*.

Note: Click **Hide Advanced Search** to close the **Advanced Search** menu.

The screenshot shows the 'Search for Parties Involved' form. At the top, there is a 'Parties Involved' dropdown menu and a 'Search' input field. Below this, a red arrow points to a 'Hide Advanced Search' link. The main section of the form is enclosed in a red border and contains four columns of search criteria: 'PARTIES INVOLVED' (with 'Involvement' dropdown, 'First Name' and 'Last Name' text boxes), 'TYPES' (with 'Intake Subtype' dropdown), 'STATUS' (with 'Intake Status' and 'Triage Priority' dropdowns), and 'PROVIDER INFO' (with 'Provider Type' and 'State' dropdowns). At the bottom, there are 'Search' and 'Reset' buttons, with a red arrow pointing to the 'Search' button.

Figure 18: Intake Parties Advanced Search

Note: Select the drop-down menu under **PARTIES INVOLVED** to view additional options for a search. Options include **Complainant**, **Alleged perpetrator**, **Person affected**, and **Other party**. See *Figure 19, Involvement*.

The screenshot shows the 'PARTIES INVOLVED' section of the form. The 'Involvement' dropdown menu is highlighted with a red box. A red arrow points from the dropdown to a list of options: 'Complainant', 'Alleged perpetrator', 'Person affected', and 'Other party', which are also enclosed in a red box.

Figure 19: Involvement

6. Add an Intake

- 6.1 Click the desired provider record. The **Provider History** page opens. For more information on searching for and accessing a provider, refer to the [S&C Manage a Provider User Manual](#) on QTSO.

Notes:

- It is also possible to click the provider from the **Basic Information** page to open **Provider History**
 - State users are permitted to enter intakes for OPO provider types; however, they are restricted from editing information beyond the basic intake details
 - An email notification is automatically sent to the Survey & Operations Group (SOG) whenever an OPO intake is created
- 6.2 Click **Add Intake** on the **Provider History** page. See *Figure 20, Recent Intakes*. The **Basic Information** window opens.



Figure 20: Add Intake

- 6.3 Click **Complaint** or **Incident**. See *Figure 21, Intake Type*. A menu opens for either a complaint or an incident.

Note: CLIA supports complaint intake records only. Incident intakes are not available.

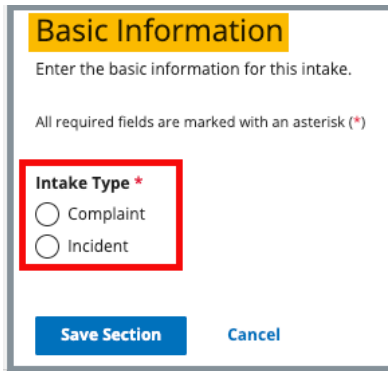
The image shows a web form titled "Basic Information" in a yellow header. Below the title, it says "Enter the basic information for this intake." and "All required fields are marked with an asterisk (*)". The "Intake Type" field is highlighted with a red border and contains two radio button options: "Complaint" and "Incident". At the bottom of the form are two buttons: "Save Section" (blue) and "Cancel" (light blue).

Figure 21: Intake Type

6.4 Fill out the information. See *Figure 22, Basic Information for Intake*.

Note: Nursing Home Providers will see **Receipt Date** and **Receipt Time** instead of **Intake Start Date** and **Intake Start Time** and will see an additional **External Control Number** field. See *Figure 23, Basic Information for Nursing Home Intakes*.

Basic Information

Enter the basic information for this Intake.

All required fields are marked with an asterisk (*)

Intake Type *

☒ Complaint
☐ Incident

Intake Method

Select one

Intake Start Date * **Intake Start Time ***

09/16/2024 3:09 PM
MM/DD/YYYY HH:MM

Tracking ID

Optional ID used by states, additional agencies, or systems.

Sources

Select...

Summary of Complaint [Text Editor Keyboard Shortcuts](#)

Powered by Froala

Intake Subtype *

Select one

Save Section **Cancel**

Figure 22: Basic Information for Intake

Basic Information

Enter the basic information for this intake.

All required fields are marked with an asterisk (*)

Intake Type *

☒ Complaint
☐ Incident

Intake Method

Select one

Receipt Date *

MM/DD/YYYY

Receipt Time *

HH:MM

Tracking ID

Optional ID used by states, additional agencies, or systems.

External Control Number

Sources

Select...

Summary of Complaint

Intake Subtype *

Select one

Save Section **Cancel**

Figure 23: Basic Information for Nursing Home Intakes

6.5 Click **Save Section**.

7. Basic Information

Purpose: The **Basic Information** page gives basic information about the intake, including type, subtype, method, receipt date/time, start date/time, tracking ID, sources, and summary.

Notes for all provider types:

- Intake **Type** and **Start Date/Time** are not editable once the intake has been saved
- **Intake Subtype** is not editable when the intake has been linked to a survey

Note for CLIA: When **Other** is selected as an **Intake Method**, the required field **Intake Method Other Description** opens.

Notes for Nursing Home provider type:

- Intake **Type** and **Receipt Date/Time** are not editable once the intake has been saved
- **Start Date/Time** does not apply to Nursing Home providers
- **Receipt Date/Time** is required for Nursing Home providers
- The intake header displays a link to MDS Assessments when the intake is for a Nursing Home provider. See [MDS Assessments Link](#) for further information.

7.1 Click **Edit** to edit the **Basic Information** details. The **Basic Information** fields are now editable. See *Figure 24, Intakes Basic Information*.

Note: If the intake subtype is changed from non-federal to federal, and it has been marked as triage complete, the intake must be re-triaged to ensure there is adequate resident protection.

Basic Information [Edit](#)

Intake Type
Complaint

Intake Subtype
Federal CoPs, CFCs, RFPs, EMTALA

Intake Method
In Person

Intake Start Date / Time
01/30/2026 10:36 AM

Tracking ID
No information

Sources

- Current Staff
- Resident/Patient/Client

Summary of Complaint
Patient was left alone with scissors

Figure 24: Intakes Basic Information

7.2 Click **Save Section**.

8. MDS Assessments

Purpose: The **MDS Assessments** link in the intake header provides access to records for admitted patients.

Notes:

- MDS Assessments link is only available for Nursing Home providers.
- Only users with appropriate permissions can view MDS Assessments.

8.1 MDS Assessments Link

Click **View Residents** under **MDS Assessments** on the intake header. See *Figure 25, MDS Assessments Link*. The **Manage Assessments** page opens with a list of admitted patients in a separate tab.

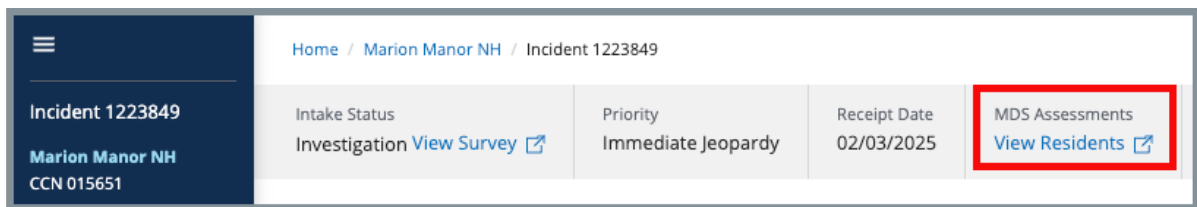


Figure 25: MDS Assessments Link

8.2 Find a Patient

8.2.1 Click **Find Patient** to find a patient within the list of admitted patients. See *Figure 26, Find Patient*. The **Find a Patient** page opens.

Note: It is always possible to scroll through the list of patients to view all patients.

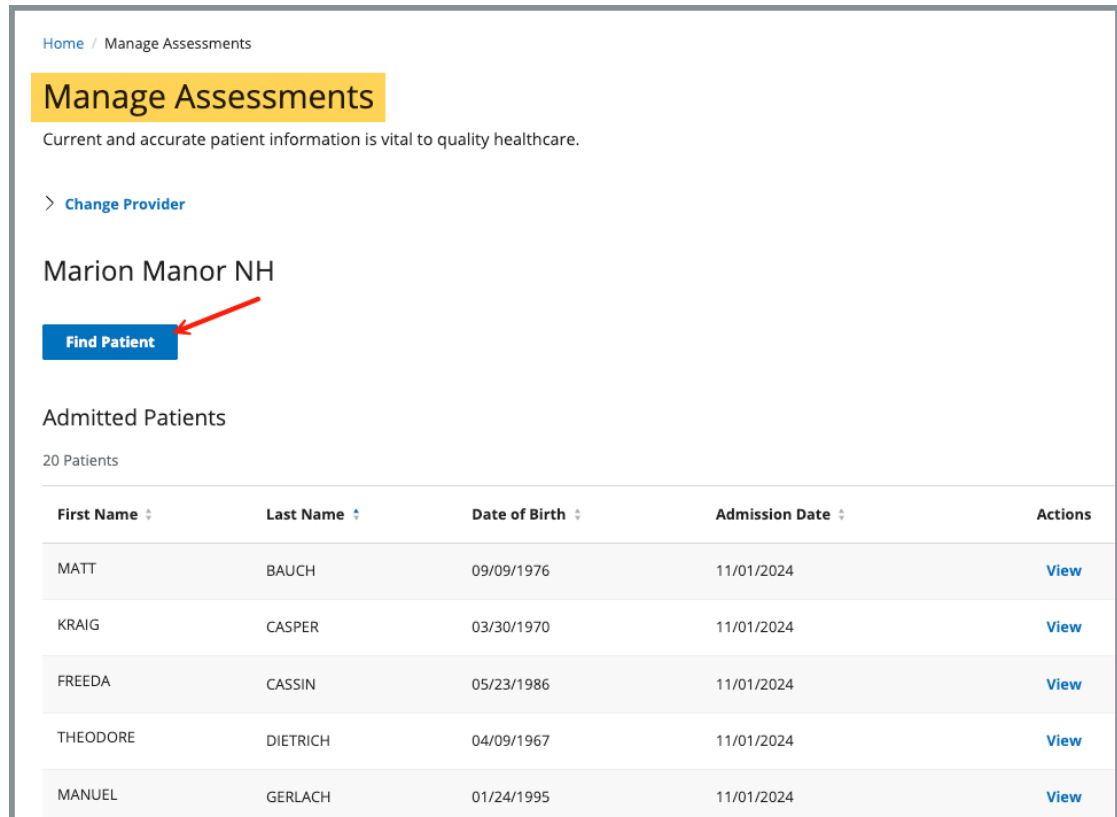


Figure 26: Find Patient

8.2.2 Type **First Name** or **Last Name** or click the caret next to **Show Advanced** for additional search options such as **Date of Birth**, **Social Security Number**, or **Admission Date**. See *Figure 27, Find a Patient Details*.

Note: Click the caret next to **Hide Advanced** to hide advanced search functions.

Find a Patient

First Name Last Name

✓ Hide Advanced

Date of Birth
Month Day Year
MM/DD/YYYY or any combination

Social Security Number

Admission Date
MM/DD/YYYY

Find Patient

Figure 27: Find a Patient Details

8.2.3 Click **Find Patient**. The **Patient Results** page opens with the results. See Figure 28, *Patient Results*.

Find a Patient

> Show Filters

Patient Results

1 Patient

View patient details and assessments

First Name	Last Name	Social Security	Date of Birth	Admission Date	Actions
MATT	BAUCH	XXX-XX-8899	09/09/1976	11/01/2024	View

Figure 28: Patient Results

8.3 View Patient Details

Click **View** under **Actions** next to the patient name to view patient details and MDS assessments. The patient information page opens. See *Figure 29, Patient Details and MDS Assessments* and *Table 4, Patient Details and MDS Assessments Detailed Callout*.

Note: The **View** option on both the [Admitted Patients](#) section and the [Patient Results](#) section navigates to the patient information page.

MATT BAUCH
123 Test Provider
Test, AL 41232

a
Patient Information

Social Security Number
Date of Birth
Medicare ID

Medicaid ID
Sex

No information
male

b
Current Provider Information

Name
Address
Agency ID
CCN

Marion Manor NH
123 Test Provider
Test, AL 41232
IQ00000004680762
015651

c
Assessments

1 Assessment

Type	Created By	Admission Date	HIPPS Code	State	Status	Actions
Comprehensive	Pat test.tong.so	11/01/2024	JDAA1	Original	Accepted 01/02/2025 5:54 PM UTC	View Print

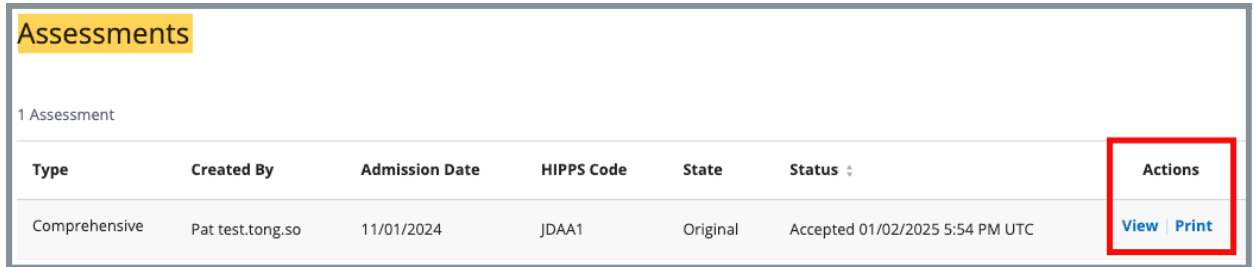
Figure 29: Patient Details and MDS Assessments

Table 4: Patient Details and MDS Assessments Detailed Callout

No.	Name	Description
a	Patient Information	Shows Social Security Number, Date of Birth, Medicare ID, Medicaid ID, and Sex
b	Current Provider Information	Shows provider Name, Address, Agency ID, and CCN
c	Assessments	Shows assessments, Type, Created By, Admission Date, HIPPS Code, State, Status , and allows viewing and printing of the assessment.

8.4 View Assessment

Click **View** under **Actions** in the **Assessments** section of the [Patient Details](#) page to view the assessment. See *Figure 30, View an Assessment*. The patient assessment opens.



Assessments						
1 Assessment						
Type	Created By	Admission Date	HIPPS Code	State	Status ▾	Actions
Comprehensive	Pat test.tong.so	11/01/2024	JDA1	Original	Accepted 01/02/2025 5:54 PM UTC	View Print

Figure 30: View an Assessment

8.5 Print Assessment

Click **Print** under **Actions** in the **Assessments** section of the [Patient Details](#) page to print the assessment.

Note: The assessment downloads to the user's computer.

9. Delete an Intake

Purpose: To delete an existing intake.

Notes:

- Intake must have a status of **Triage/Prioritization**
- Only the CMS General User and the Intake Admin user roles can delete an intake

9.1 Go to the **Basic Information** page of the intake. See *Figure 31, Intake Basic Information Page*.

Intake Status	Priority	Intake Start Date	Primary Complainant
Triage/Prioritization	No information	02/06/2025	No information

Basic Information

Intake Type
Complaint

Intake Subtype
Federal CoPs, CFCs, RFPs, EMTALA

Intake Method
In Person

Intake Start Date / Time
02/06/2025 2:59 PM

Tracking ID
No information

Sources
No information

Summary of Complaint
Resident claimed that CNA was throwing banana peels on the ground so resident would slip on them.

Intake action ▾
Change Provider
Delete

Edit

Figure 31: Intake Basic Information Page

9.2 Select **Delete** from the **Intake** action drop-down menu. The **Confirm Intake Deletion** pop-up window opens.

Note: The **Delete** selection only appears when all conditions noted above are met.

- 9.3 Select the **Deletion Reason** from the drop-down menu under **Deletion Reason**. See *Figure 32, Deletion Reason*.

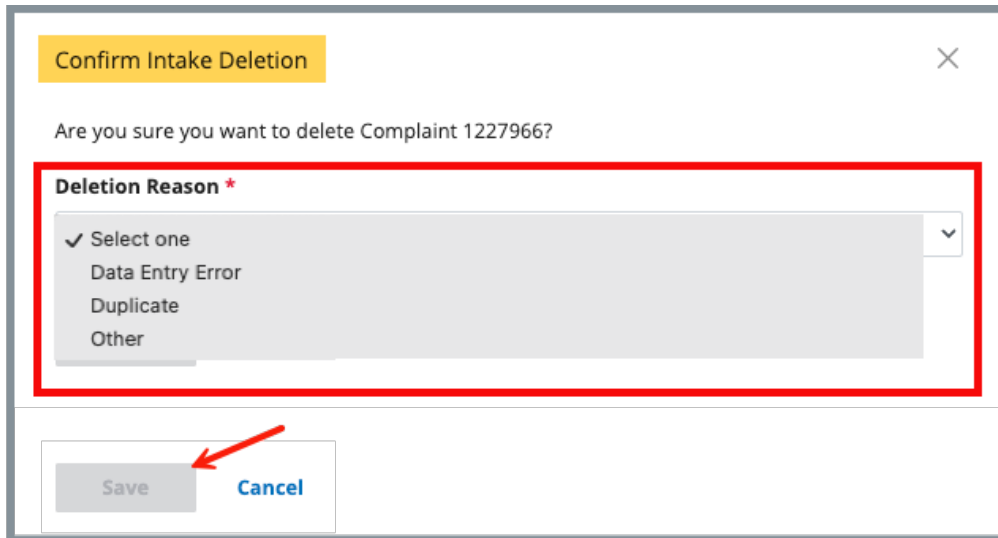
A screenshot of a 'Confirm Intake Deletion' dialog box. The title bar is yellow with the text 'Confirm Intake Deletion' and a close button (X) in the top right. The main content area is white and contains the question 'Are you sure you want to delete Complaint 1227966?'. Below this is a section titled 'Deletion Reason *' which contains a drop-down menu. The menu is open, showing four options: 'Select one' (with a checkmark), 'Data Entry Error', 'Duplicate', and 'Other'. A red rectangular box highlights the entire 'Deletion Reason' section. At the bottom of the dialog, there are two buttons: 'Save' (disabled, grey) and 'Cancel' (active, blue). A red arrow points to the 'Save' button.

Figure 32: Deletion Reason

- 9.4 Click **Save**.

Note: **Save** is disabled until a reason is selected.

- 9.5 Verify the green notification banner confirms the intake was deleted. See *Figure 33, Intake Deletion Green Notification Banner*.

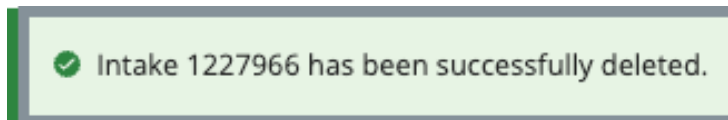


Figure 33: Intake Deletion Green Notification Banner

10. Responsible Staff

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

Notes:

- Responsible Staff are HARP ID users.
- One SAGU and one CMSGU must be selected as Responsible Staff for deemed providers to complete triage when CMS approval is required. This does not apply to Nursing Home providers.
- Adding Responsible Staff ensures that the appropriate individuals receive email notifications throughout the complaint process (approval, reviewing investigation findings).

10.1 Click **Responsible Staff** on the left menu. The **Responsible Staff** window opens. See *Figure 34, Intakes Responsible Staff*.

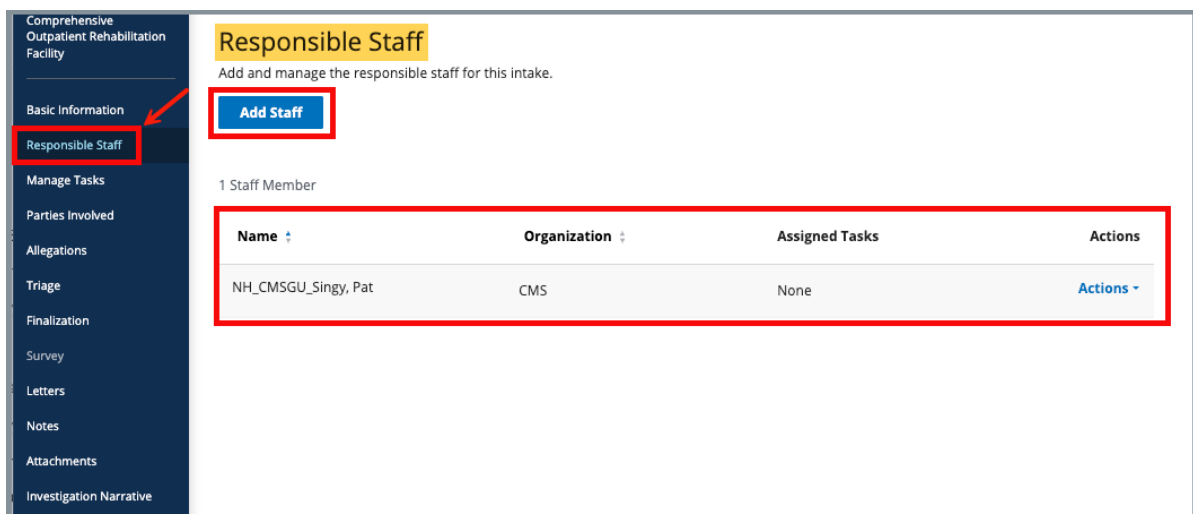


Figure 34: Intakes Responsible Staff

10.2 Click **Add Staff** to add responsible staff. The **Add Responsible Staff** page opens.

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

10.4 Click **Search**. The search results appear below.

10.5 Check the box under **Select** next to the correct name. Click **Save**.

Notes:

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

10.6 Verify the staff member was added.

10.7 Click **Delete** under **Actions** to delete a staff member. A confirmation pop-up window opens.

10.8 Click **Delete**. See *Figure 35, Delete a Responsible Staff*.

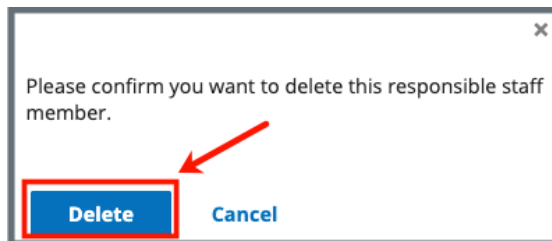


Figure 35: Delete a Responsible Staff

10.9 Verify that the Responsible Staff is no longer on the list.

11. Manage Tasks

Purpose: To manage and assign tasks for Responsible Staff.

Click **Manage Tasks** on the left menu. The **Manage Tasks** window opens. See *Figure 36, Manage Tasks*. See *Table 5, Manage Tasks Detailed Callout*.

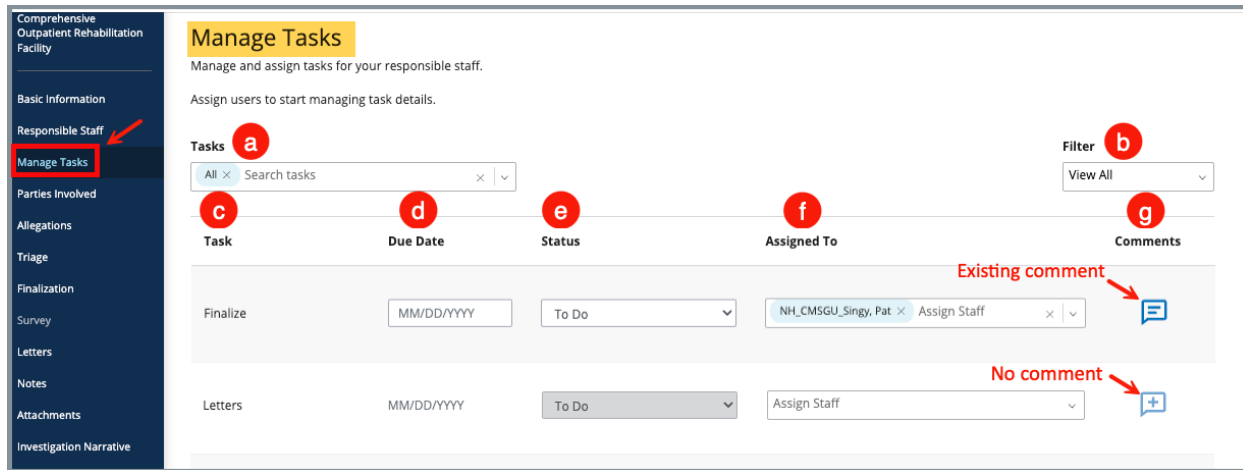


Figure 36: Manage Tasks

Table 5: Manage Tasks Detailed Callout

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

12. Parties Involved

Purpose: Add, manage, or view parties involved with the intake for the complaint.

Note: The **Complainant** and the **Person Affected** can be anonymous. Multiple anonymous people cannot be added.

12.1 Click **Parties Involved** on the left menu. See *Figure 37, Add Parties Involved*.

Figure 37: Add Parties Involved

Note: The **Parties Involved** window opens when there is an existing party. See *Figure 38, Add Parties Involved*.

Figure 38: Parties Involved

12.2 Select **Involvement** type.

12.3 Select **Yes** or **No** for Is this person anonymous?

Note: **Is this person anonymous?** only appears when either **Complainant** or **Person affected** is selected.

12.4 Click **Add Party**.

Notes:

- **Add Party** is disabled until an **Involvement** is selected.
- The **Add Parties Involved** window opens when the person is anonymous.
- The **Add Complainant** window opens when **Complainant** is selected and is not anonymous.
- The **Add Alleged Perpetrator** window opens when **Alleged perpetrator** is selected.
- The **Add Person Affected** window opens when **Person affected** is selected and is not anonymous.
- The **Add Other Party** window opens when **Other party** is selected.

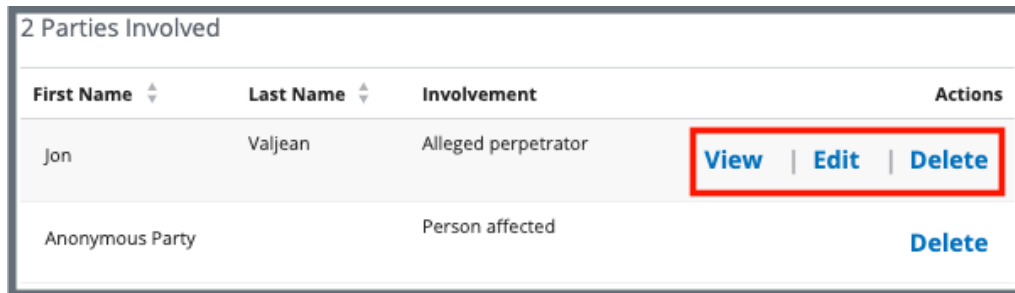
12.5 Fill out the information.

12.6 Click **Save**.

12.7 Add additional parties, as necessary.

12.8 Verify all parties involved are included on the **Parties Involved** page.

12.9 Click **View**, **Edit**, or **Delete** under **Actions** to view, edit or delete an involved party. See *Figure 39, View, Edit, Delete*.



First Name	Last Name	Involvement	Actions
Jon	Valjean	Alleged perpetrator	View Edit Delete
Anonymous Party		Person affected	Delete

Figure 39: View, Edit, Delete

Notes:

- Anonymous parties cannot be viewed or edited. They can only be deleted.
- A pop-up window asks to confirm a deletion.

13. EMTALA

Purpose: To create an **EMTALA** (the Emergency Medical Treatment and Labor Act) allegation.

Notes:

- **EMTALA** is enabled for the Hospital provider type.
- Three emails are triggered by an EMTALA allegation:
 1. A complaint submitted from the EMTALA web portal triggers an email to a state distribution list alerting recipients to the submission.
 2. An email is sent to all CMS Responsible Staff assigned to the intake after a state user selects the **Request for CMS Location Approval** checkbox.
 3. An email is sent to all state users assigned as Responsible Staff on the intake after a user sets the **CMS Location Response** field.

- 13.1 Click **EMTALA** on the left menu. The **Create EMTALA Allegation** window opens. See *Figure 40, EMTALA, page 1 of 2* and *Figure 41, EMTALA, page 2 of 2*.

Create EMTALA Allegation
All required fields are marked with an asterisk (*)

☐ Request for CMS Location Approval Request for CMS Location Approval Date
MM/DD/YYYY

CMS Location Response **CMS Location Response Date**
Select one MM/DD/YYYY

Extension Granted Until
MM/DD/YYYY

EMTALA

Type of Emergency
☐ Labor
☐ Other OB
☐ Medical
☐ Trauma
☐ Psychiatric
☐ Surgical
☐ Other

CMS Location Determination
Select one

CMS Location Confirmed Violation **CMS Location Confirmed No Violation**
MM/DD/YYYY MM/DD/YYYY

☐ 23 Day Termination Track **23 Day Termination Track Date** ☐ 23 Day Conversion **23 Day Conversion Date**
MM/DD/YYYY MM/DD/YYYY

☐ 90 Day Termination Track **90 Day Termination Track Date**
MM/DD/YYYY

Resolution **Imposed Termination**
Select one MM/DD/YYYY

Figure 40: EMTALA, page 1 of 2

<p>QIO EMTALA</p> <p>☐ Referred To QIO</p> <p>5 Day Review Sent</p> <p>MM/DD/YYYY</p> <p>5 Day Due</p> <p>MM/DD/YYYY</p> <p>5 Day Received</p> <p>MM/DD/YYYY</p> <p>60 Day Review Sent</p> <p>MM/DD/YYYY</p> <p>60 Day Due</p> <p>MM/DD/YYYY</p> <p>60 Day Received</p> <p>MM/DD/YYYY</p> <p>Referred To OIG</p> <p>MM/DD/YYYY</p> <p>☐ Referred To OCR</p>	<p>See Note</p>
<p>EMTALA Allegations (linked to Allegations on the Allegations Page) *</p> <ul style="list-style-type: none">☐ Physician on-call list☐ Screening☐ Medical Records☐ Recipient Hospital Responsibilities☐ Policies/Procedures☐ Treatment☐ Reporting Requirement☐ Delay in Examination or Treatment☐ Transfer/Discharge☐ Posting of Signs☐ Whistleblower☐ Central Log	
<p>Signature</p> <p>Regional Administrator/Designee</p> <p></p> <p>Region</p> <p>4 - Atlanta</p> <p>Comments</p> <p></p> <p>0/255 characters</p> <p>Save</p>	

Figure 41: EMTALA, page 2 of 2

13.2 Click **Save**.

Note: An allegation can be automatically created when an additional EMTALA allegation is selected under **EMTALA Allegations**. This allegation is then shown on the [Allegations](#) page.

14. CMS-10455

Purpose: To link to an existing CMS-10455 form, the Report of a Hospital Death associated with restraint or seclusion.

Note: This form is for the Hospital provider type only.

14.1 Click **CMS-10455** on the left menu. The **CMS-10455** window opens. See *Figure 42, CMS-10455*.

Note: The **Link to an existing CMS-10455 Form** clickable link opens when there is no existing CMS-10455.

Home / Search / Singy Critical Access Hospital / Complaint 1919900

Intake Status	Priority	Intake Start Date	Primary Complainant
Triage/Prioritization	No information	06/08/2026	No information

REPORT OF A HOSPITAL DEATH ASSOCIATED WITH RESTRAINT OR SECLUSION

Form 10455

There is no REPORT OF A HOSPITAL DEATH ASSOCIATED WITH RESTRAINT OR SECLUSION for this intake.

[Link to an existing CMS-10455 Form](#)

Figure 42: CMS-10455

14.2 Click **Link to an existing CMS-10455 Form**. The **Link Form to Intake** pop-up window opens. See *Figure 43, Link Form to Intake*.

Link Form to Intake: Complaint 1919900

1 Form

Form Name	Status	Created Date	Last Updated
☐ CMS-10455	In Progress	06/08/2026	06/08/2026

[Save](#) [Cancel](#)

Figure 43: Link Form to Intake

14.3 Select the radio button next to the desired form.

14.4 Click **Save**. The **Linking Intake** pop-up window opens. See *Figure 44, Linking Intake*.

Note: **Save** is disabled until a selection is made.

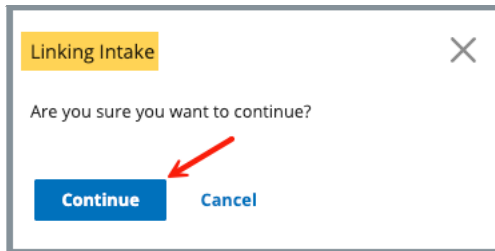


Figure 44: Linking Intake

14.5 Click **Continue**. The form opens on the CMS-10455 page.

15. Allegations

Purpose: To enter and track allegations.

Note: Each allegation must be entered separately.

15.1 Click **Allegations** on the left menu. The **Add Allegation** window opens. See *Figure 45, Add Allegation*.

Notes:

- When there are existing allegations, an **Add Allegation** button is shown above the existing allegations. Click **Add Allegation** to add a new allegation.
- Nursing Home providers do not show **Allegation Findings**.

Notes for CLIA:

- When **Other** is selected as an **Intake Method**, the required field **Other Category Name** opens.
- CLIA intakes do not show **Seriousness**.

The screenshot shows the 'Add Allegation' form in the CMS iQIES system. The sidebar on the left contains the following navigation options: Singy's Road, IQIES ID 3813554, Comprehensive Outpatient Rehabilitation Facility, Basic Information, Responsible Staff, Manage Tasks, Parties Involved, **Allegations** (highlighted with a red box and arrow), Triage, Finalization, Survey, Letters, Notes, Attachments, and Investigation Narrative. The main form area is titled 'Add Allegation' and includes a note: 'All required fields are marked with an asterisk (*)'. The form contains the following fields and sections:

- Category ***: A dropdown menu with 'Select one'.
- Subcategory**: A dropdown menu with 'Select one'.
- Seriousness**: Three radio buttons labeled 'Minor', 'Moderate', and 'Critical'.
- Person Affected**: A dropdown menu with 'Select...'.
- Shift**: A text input field.
- Date**: A text input field with the format 'MM/DD/YYYY'.
- Time**: A dropdown menu with '12:00 AM' and the format 'HH:MM'.
- Allegation Details ***: A rich text editor with a toolbar containing icons for undo, redo, bold, italic, underline, list, link, unlink, and image.
- Allegation Findings**: Two radio buttons labeled 'Substantiated' and 'Unsubstantiated'.
- Save**: A button at the bottom right, highlighted with a red arrow.

Figure 45: Add Allegation

15.2 Fill in the form with as much information as possible.

15.3 Click **Save**. The window populates with form information.

Note: **Save** is disabled until required fields are filled out.

15.4 Click **Return to Allegations Overview** to add additional allegations, if necessary.

15.5 Click **View**, **Edit**, or **Delete** to view, edit, or delete an allegation.

Note: A pop-up window asks to confirm a deletion.

16. Triage

Purpose: To enter and view the triage prioritization.

Note: The Survey Admin user role allows users to view the Intake Triage page and to close intakes.

16.1 Click **Triage** on the left menu. The **Triage** window opens. See *Figure 46, Triage*.

Complaint 1856969
Singy's Road
 IQIES ID 3813554
 Comprehensive
 Outpatient Rehabilitation
 Facility

Basic Information
 Responsible Staff
 Manage Tasks
 Parties Involved
 Allegations
Triage
 Finalization
 Survey
 Letters
 Notes
 Attachments
 Investigation Narrative

Triage

Indicate the priority of this complaint and if additional actions are required.
 All required fields are marked with an asterisk (*)

Priority

Priority Level *

☐ Immediate Jeopardy
☐ Non-Immediate Jeopardy-High
☐ Non-Immediate Jeopardy-Medium
☐ Non-Immediate Jeopardy-Low
☐ Not Applicable

Referral Level

☐ Refer Immediately
☐ Refer
☐ No Referral

Survey

Action Required

☐ Survey
☐ Offsite Investigation/Administrative Review
☐ No Investigation

Triage Completion

☐ Triage Complete

Triage Complete Date **Time**

MM/DD/YYYY HH:MM

Save Section

Figure 46: Triage

16.2 Fill in the form with as much information as possible.

Notes for Acute Care Provider Types (i.e., ASC, HHA, ESRD, etc.):

- A priority level is required.
- If a survey is required, check the **Enter calculated date** box to have the date calculated. Click **Accept Date** to accept the date. **Accept Date** populates the **Survey Due Date** box.
- The **Triage Complete Date / Time** autopopulates.

Notes for CLIA:

Only supports **Immediate Jeopardy**, **Non-Immediate Jeopardy**, and **Not Applicable**

Notes for Nursing Home Provider Type:

- A priority level is required
 - If the **Priority Level** is **Immediate Jeopardy**, **Non-Immediate Jeopardy-High**, or **Non-Immediate Jeopardy-Medium**, the system selects **Survey for Action Required**.
 - If a priority level of **Immediate Jeopardy** is selected for an incident intake, the **Adequate Resident Protection** field opens. Select **Yes/No** from the drop-down menu.
- Select a **Referral Level** of **Refer Immediately** or **Refer** to add multiple referral agencies
- Additional fields open when **Refer Immediately** or **Refer** is selected.
 - Referral Agency
 - Date of Referral
 - Referral Contact Name
 - Referral Website
- The **Triage Complete Date** and **Time** fields autopopulate when **Triage Complete** is selected
- Additional comments about the intake can be made in the **Triage Comments** field.

16.3 Click **Save Section**.

16.4 Click **Edit** to edit the Triage, if desired. The **Edit Triage** window opens. See *Figure 47, Edit Triage*.

Edit Triage

Indicate the priority of this complaint and if additional actions are required.

All required fields are marked with an asterisk (*)

Priority

Priority Level *

☒ Immediate Jeopardy

☐ Non-Immediate Jeopardy-High

☐ Non-Immediate Jeopardy-Medium

☐ Non-Immediate Jeopardy-Low

☐ Not Applicable

Referral Level

☐ Refer Immediately

☒ Refer

☐ No Referral

Referral Agencies

The Joint Comm on Accred for Health Care Organizations

Select...

Survey

Action Required

☒ Survey

☐ Offsite Investigation/Administrative Review

☐ No Investigation

Triage Completion

☒ Triage Complete

Triage Complete Date *

11/05/2021

MM/DD/YYYY

Time *

2:45 PM

HH:MM

Survey Due Date

Based on the priority, the federal maximum time to initiate a survey is 2 days. Enter or calculate a due date for this survey.

☐ Enter calculated date

Survey Due Date

05/04/2021

MM/DD/YYYY

Save Section Cancel

Figure 47: Edit Triage

16.5 Update the form.

Note: Check the **Triage Complete** box on the form to complete the triage. See *Figure 48, Triage Completion*.

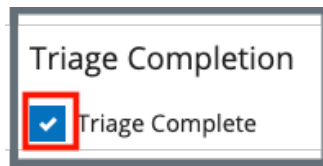


Figure 48: Triage Completion

16.6 Click **Enter calculated date**. A form opens and shows calculation dates. See *Figure 49, Calculate Date*.

Note: **Calculated date** does not apply for Nursing Home providers.

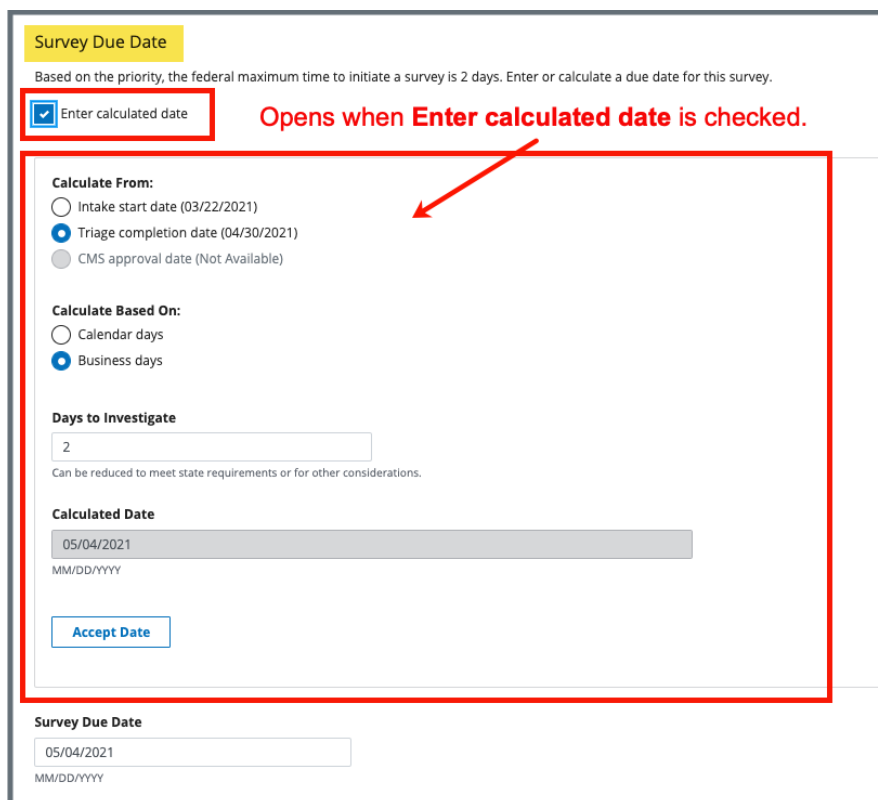


Figure 49: Calculate Date

Note: The **Intake Sent Date** (automatically generated) is the date the intake was sent to CMS, if CMS approval is required. The intake may be sent more than once. In that case, it is the latest date the intake was sent.

16.7 Click **Save Section**. The window populates with updated form information.

17. Finalization

Purpose: To ensure the intake is manually closed after the intake status changes to **Pending Finalization** when the Statement of Deficiencies has been sent.

Notes:

- Closed intakes cannot be modified. [Go to Reopen Intake](#) if an intake needs to be reopened.
- Intakes with an **Action Required** other than **Survey** can also be closed when the intake status is **Pending Finalization**.

17.1 Click **Finalization** on the left menu. The **Finalization** window opens. See *Figure 50, Finalization*.

Note: The **Edit** button does not appear until the intake status is **Pending Finalization**.

Complaint 1466200 Stateside OPO CCN 10P054 Organ Procurement Organization Tier 1	Intake Status Pending Finalization	Priority Non-Immediate Jeopardy-Low	Intake Start Date 08/26/2025	Primary Complainant No information	Intake Findings Substantiated	Intake action -
---	---------------------------------------	--	---------------------------------	---------------------------------------	----------------------------------	-----------------

Finalization

Finalized

No

Closed Date / Time

No information

Closed Reasons

No information

Edit

Figure 50: Finalization

17.2 Click **Edit**. The **Edit Finalization** window opens. See *Figure 51, Edit Finalization*.

Notes:

- Fields are disabled until **Finalized** is selected.
- The **Closed Date** and **Time** fields automatically populate but can be updated.

Figure 51: Edit Finalization

17.3 Check the box next to **Finalized**.

17.4 Select one or more **Closed Reasons** from the drop-down list.

17.5 Click **Save**. The **Finalization** page updates and the **Intake Status** changes to **Closed**. See *Figure 52, Intake Status*.

Figure 52: Intake Status

- 17.6 Click **Reopen Intake** under **Intake action** to reopen an intake. See *Figure 53, Reopen Intake*. A green banner notes that the intake is reopened.

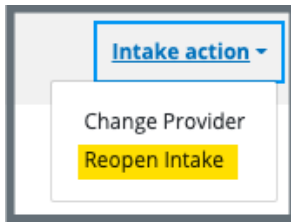


Figure 53: Reopen Intake

18. Survey

Purpose: To create a survey if one is required for the intake.

Notes:

- Triage must be completed
- An intake can be linked to a survey when it has an **Action Required of Survey**
- A triage category that requires a survey must be selected to enable the survey tab
- Refer to [S&C User Manual: Manage a Survey](#) for further details

18.1 Click **Survey** on the left menu. The **Survey** window opens. See *Figure 54, Survey*.

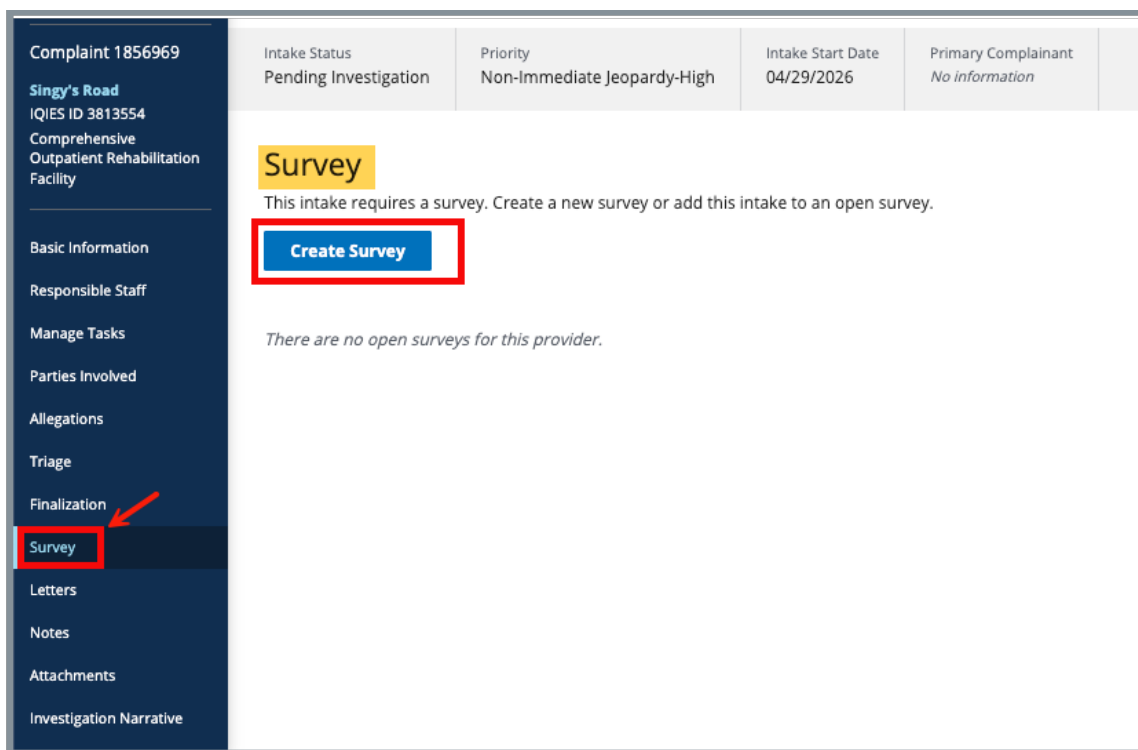


Figure 54: Survey

18.2 Click **Create Survey**. The **Survey Basic Information** page opens. See *Figure 55, Survey Basic Information*.

Note: The **Survey Basic Information** page opens when there is an existing survey. Click **Edit** to edit that survey.

18.3 Fill out the information.

Basic Information

Manage 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

☐ Initial Certification ⓘ

☒ Recertification

☒ Complaint ⓘ

☐ Federal Monitoring Survey ⓘ

☐ Focused Infection Control ⓘ

State Categories

☐ Initial Licensure

☐ Re-Licensure

☐ Licensure Complaint

Survey Extents

Survey extents are determined based upon the Federal Survey Categories and Citation Levels for this survey. If a survey extent is appropriate, it can be added once citations are entered. Recommended extents are displayed during the process of locking citations.

Survey Extents ⓘ

☐ Standard

☐ Abbreviated

☐ Extended

☐ Partial Extended

☐ Other

Open Intakes to Include in Complaint Survey *

☒ Incident 1077102 ⓘ

☒ Complaint 1078501 ⓘ

Regulation Sets *

Federal Regulation Sets

☐ Emergency Preparedness (FED - E - 1.04)

☒ LONG TERM CARE FACILITIES (FED - F - 20.00)

State Regulation Sets ⓘ

☐ Alabama Licensure L T C (ST - L - 1.1)

> [Show Older Regulation Sets](#)

Survey Status

Start Date ⓘ

06/25/2024

MM/DD/YYYY

Exit Date

MM/DD/YYYY

Survey Status *

☒ Open

☐ Closed ⓘ

Survey Due Date

09/06/2024

[Save Basic Information](#) [Cancel](#)

Figure 55: Survey Basic Information

18.4 Click **Save Basic Information**. The **Survey Basic Information** page updates.

19. Link an Intake

Purpose: To link an intake to a survey.

Notes:

- There must be an existing complaint intake to link an intake to a survey.
- There are two ways to link an intake to a survey, from the **Provider History** page or from the **Complaint** page.

19.1 Link an Intake to a Survey from the Provider History page

- 19.1.1 Click **Add Survey** on the **Provider History** page. The **Basic Information** page opens. See *Figure 56, Link an Intake Basic Information*.
- 19.1.2 Check the **Complaint** box in the **Survey Categories** section.
Note: An intake must be pending investigation to check Complaint.
- 19.1.3 Select the intake to include under **Open intakes** to include in **Complaint Survey**.
- 19.1.4 Click **Save Basic Information**. The complaint is now linked to the survey.

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 *

☒ Health

☐ Life Safety Code

Survey Categories *

Federal Categories

☐ Initial Certification ⓘ

☐ Recertification

☒ Complaint

☐ Focused Infection Control

State Categories

☐ Initial Licensure

☐ Re-Licensure

☐ Licensure Complaint

Survey Extents

Survey extents are determined based upon the Federal Survey Categories and Citation Levels for this survey. If a survey extent is appropriate, it can be added once citations are entered. Recommend

Survey Extents ⓘ

☐ Standard

☐ Abbreviated

☐ Extended

☐ Partial Extended

☐ Other

Open Intakes to Include in Complaint Survey *

☒ Incident 412536 ⓘ

Regulation Sets *

Federal Regulation Sets

☐ Emergency Preparedness (FED - E - 1.01)

☐ HOME HEALTH AGENCIES (FED - G - 12.00)

> [Show Older Regulation Sets](#)

State Regulation Sets ⓘ

☐ Core Licensure (ST - C - 2.04)

☐ HOME HEALTH AGENCIES (ST - H - 7.02)

> [Show Older Regulation Sets](#)

Survey Status

Start Date

MM/DD/YYYY

Exit Date

MM/DD/YYYY

Survey Due Date

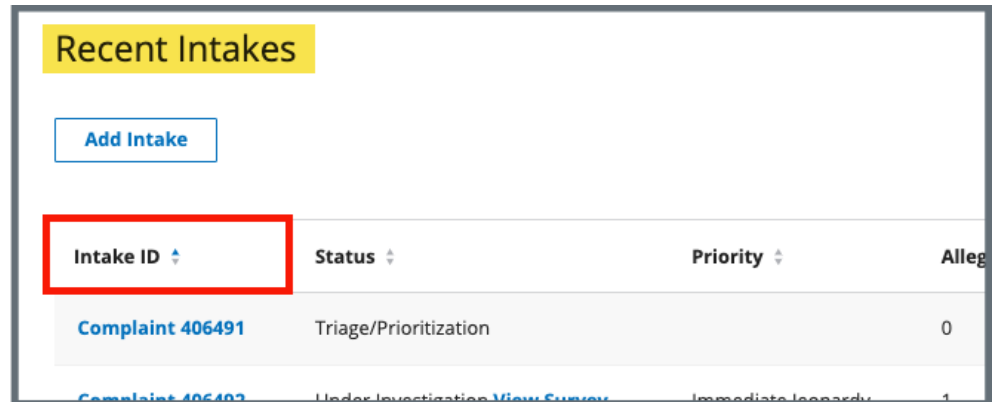
No information

[Save Basic Information](#) [Cancel](#)

Figure 56: Link an Intake Basic Information

19.2 Link an Intake to a Survey from the Complaint page.

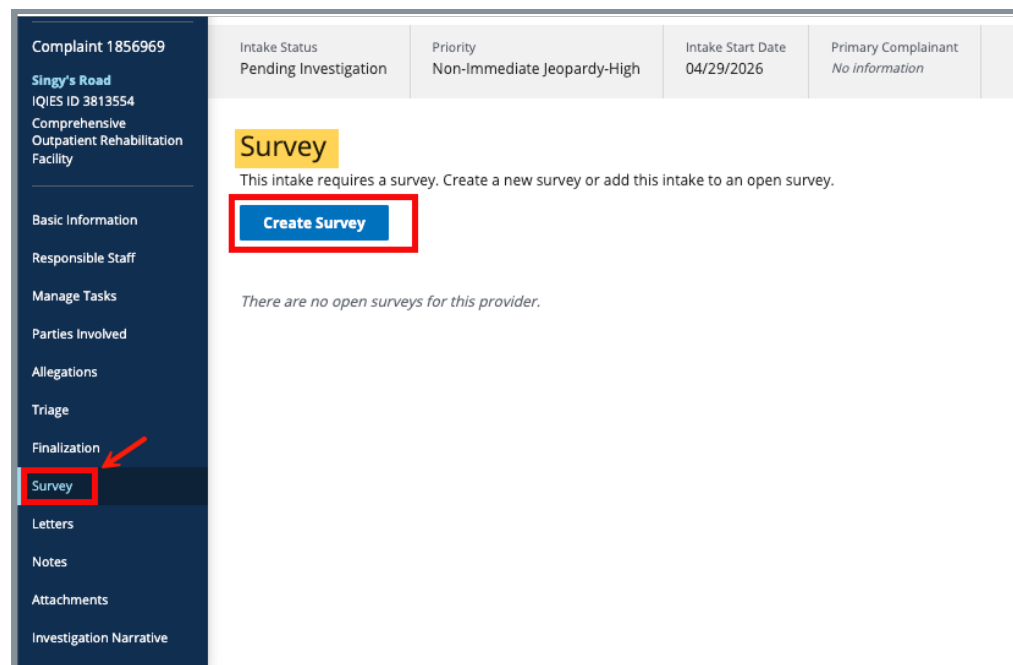
- 19.2.1 Select the **Intake ID** under **Recent Intakes** on the **Provider History** page. See *Figure 57, Intake ID Link*. The **Basic Information** page opens.



Intake ID	Status	Priority	Alleg
Complaint 406491	Triage/Prioritization		0
Complaint 406492	Under Investigation	View Survey	Immediate Jeopardy

Figure 57: Intake ID Link

- 19.2.2 Click **Survey** on the left menu. The **Survey** page opens.
- 19.2.3 Click **Create Survey**. See *Figure 58, Create Survey*. The **Create Survey Basic Information** page opens.



Complaint 1856969
Sing's Road
IQIES ID 3813554
Comprehensive Outpatient Rehabilitation Facility

Intake Status: Pending Investigation | Priority: Non-Immediate Jeopardy-High | Intake Start Date: 04/29/2026 | Primary Complainant: No information

Survey

This intake requires a survey. Create a new survey or add this intake to an open survey.

[Create Survey](#)

There are no open surveys for this provider.

Basic Information
Responsible Staff
Manage Tasks
Parties Involved
Allegations
Triage
Finalization
Survey
Letters
Notes
Attachments
Investigation Narrative

Figure 58: Create Survey

Note: The correct complaint intake is already selected under **Open intakes to include in Complaint Survey**. See *Figure 59, Open Intakes to Include in Complaint Survey*.



Survey Extents
Survey extents are determined based upon the Federal Survey Category and the process of locking citations.

Survey Extents ⓘ

- ☐ Standard
- ☐ Abbreviated
- ☐ Extended
- ☐ Partial Extended
- ☐ Other

Open Intakes to Include in Complaint Survey * ⓘ

- ☒ Complaint 406492 [🔗](#)

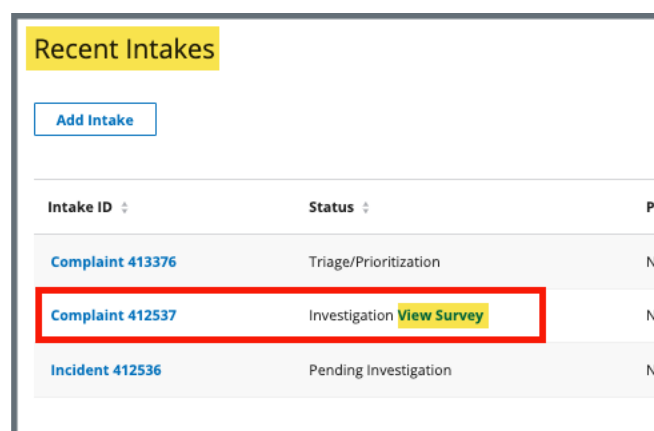
Regulation Sets *

Federal Regulation Sets ⓘ

- ☐ Emergency Preparedness (FED - E - 1.00)
- ☐ Emergency Preparedness (FED - E - 1.01)
- ☐ Emergency Preparedness (FED - E - 1.02)

Figure 59: Open Intakes to Include in Complaint Survey

- 19.2.4 Fill out any other required information.
- 19.2.5 Click **Save Basic Information**. The **Survey Basic Information** page opens. The complaint or incident is now linked to the complaint survey. See *Figure 60, Linked Survey to Intake*.



Recent Intakes

[Add Intake](#)

Intake ID	Status	Priority
Complaint 413376	Triage/Prioritization	Normal
Complaint 412537	Investigation View Survey	Normal
Incident 412536	Pending Investigation	Normal

Figure 60: Linked Survey to Intake

20. Reassign Intake to a Different Provider

Purpose: To change a provider on an intake after intake information such as a complaint, allegation, letters, Investigation Narrative, etc., has been added. When a provider is changed, all information entered in the intake is moved to the new provider.

Note: The provider cannot be changed when:

- The intake status is **Pending Investigation, Investigation Scheduled, Pending Finalization, Investigation Completed**
- The intake is included in a complaint survey
- The intake is marked as **Triage Complete**

20.1 Click **Change Provider** from the **Intake** action drop-down menu. See *Figure 61, Change Provider Drop-Down Menu*. The **Change Provider** pop-up window opens.

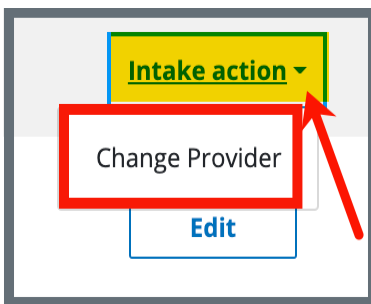


Figure 61: Change Provider Drop-Down Menu

20.2 Type the provider, DBA name, CCN or State Facility ID (FACID) to search for the correct provider. See *Figure 62, Change Provider for Complaint*.

Change Provider for Complaint 375907

Search for Provider

FL **Search**

Enter provider or DBA name, CCN, or State Facility ID (FACID)

1 - 4 of 853 Providers

Provider	ID	Provider Type	Deemed Status
☐ House of the Rising Sun 2	FACID IQ00000002727432	HHA	Non-Deemed
☐ House of the Rising Sun	FACID IQ00000002544345	HHA	Non-Deemed
☐ House of the Rising Sun3	FACID IQ00000002521587	HHA	Non-Deemed
☐ House of the Rising Sun54	CCN A28439 FACID IQ00000002535606	HHA	Non-Deemed

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Submit **Cancel**

Figure 62: Change Provider for Complaint

- 20.3 Click the radio button next to the correct provider.
- 20.4 Click **Submit**. The **Changing Provider** pop-up window opens. See Figure 63, *Changing Provider*.

Changing Provider

Are you sure you want to continue?

Continue **Cancel**

Figure 63: Changing Provider

- 20.5 Click **Continue**.

- 20.6 Verify the green notification banner is at the top of the window confirming the intake provider was changed. See *Figure 64, Provider Intake Changed Green Notification Banner*.

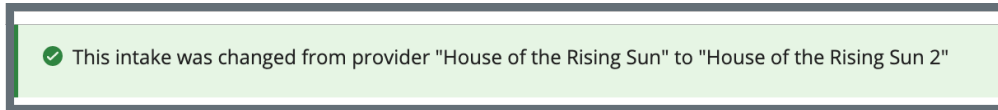


Figure 64: Provider Intake Changed Green Notification Banner

21. Letters, Notes, Attachments

Note: **Letters, Notes, and Attachments** information can be found in the S&C User Manual: **Letters, Notes, and Attachments** on [QTSO](#).

22. Investigation Narrative

Purpose: To add a summary of the investigation, additional notes, or other text.

Notes:

- Investigation narratives cannot be deleted once they are saved.
- Anyone can update the **Investigation Narrative**; it is not limited to the original creator.

22.1 Click **Investigation Narrative** on the left menu. The **Add Investigation Narrative** window opens. See *Figure 65, Add Investigation Narrative*.

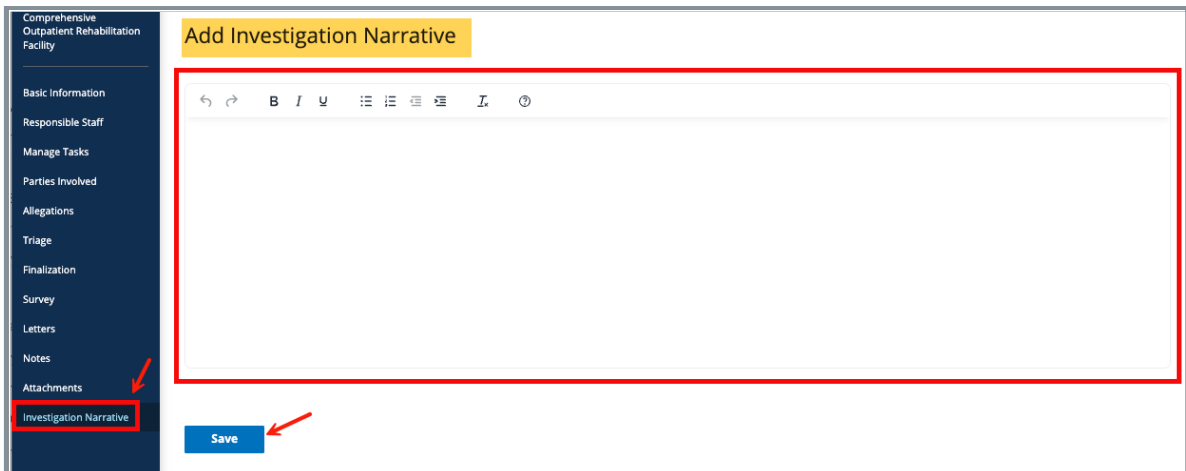


Figure 65: Add Investigation Narrative

22.2 Type freeform text in the text box.

22.3 Click **Save**. The **Add Investigation Narrative** window closes. The investigation narrative shows on the intake page. It can be edited or downloaded.

22.4 Click **Edit** to edit the investigation narrative. Click **Save** after editing. See *Figure 66, Edit or Download an Investigation Narrative*.

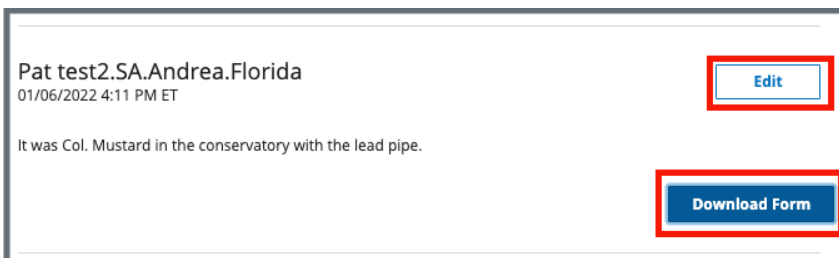


Figure 66: Edit or Download an Investigation Narrative

Notes:

- Be aware that two users can be in **Edit** mode in the **Investigation Narrative** at the same time. See *Figure 67, Concurrent Editor Notification*. One user will overwrite the other person's data. Exit **Edit** mode if either of the notifications below is shown. Carefully verify that any input has been saved correctly. Be sure to refresh the screen, if necessary.

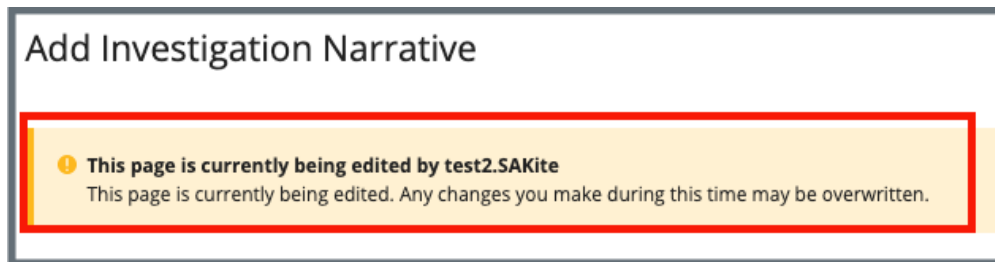


Figure 67: Concurrent Editor Notification

- A pencil icon is shown next to **Investigation Narrative** 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 **Investigation Narrative**. See *Figure 68, Investigation Narrative Pencil Icon*.

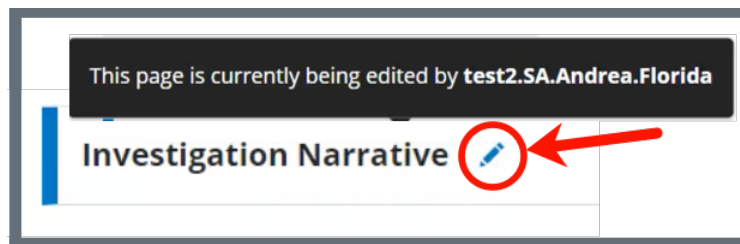


Figure 68: Investigation Narrative Pencil Icon

- 22.5 Click **Download** to download the narrative, if desired. The narrative downloads as a .pdf.