

Extended Survey

When the State or regional office conducts a standard or abbreviated survey, and suspects substandard quality of care (SQC) but does not have sufficient information to confirm or refute the SQC, the survey sample must be expanded. This expansion does not necessarily constitute an extended or partial extended survey. If the expanded survey does not verify substandard quality of care, but finds noncompliance, a Form CMS 2567 is prepared as required in 7305 of Chapter 7 of the State Operations Manual (SOM). If the expanded survey verifies SQC, an extended or partial extended survey is conducted.

Substandard Quality of Care is defined as one or more deficiencies with scope/severity levels of F, H, I, J, K, or L in any of the following F tags:

483.10 Resident Rights	483.25 Quality of Care	483.40 Behavioral Health Services
F550 – Resident Rights/Exercise of Rights	F684 – Quality of Care	F742 – Treatment/Svc for Mental/Psychosocial Concerns
F558 – Reasonable Accommodation of Needs/Preferences	F685 – Treatment/Devices to Maintain Hearing/Vision	F743 – No Pattern of Behavioral Difficulties Unless Unavoidable
F559 – Choose/Be Notified of Room/Roommate Change	F686 – Treatment/Services to Prevent/Heal Pressure Ulcers	F744 – Treatment/Service for Dementia
F561 – Self Determination	F687 – Foot Care	F745 – Provision of Medically Related Social Services
F565 – Resident/Family Group and Response	F688 – Increase/Prevent Decrease in ROM/Mobility	483.45 Pharmacy Services
F584 – Safe/Clean/Comfortable/Homelike Environment	F689 - Free of Accident Hazards/Supervision/Devices	F757 – Drug Regimen is Free From Unnecessary Drugs
483.12 Freedom from Abuse, Neglect, and Exploitation –	F690 – Bowel/Bladder Incontinence, Catheter, UTI	F758 – Free From Unnecessary Psychotropic Meds/PRN Use
F600 – Free from Abuse and Neglect	F691 – Colostomy, Urostomy, or Ileostomy Care	F759 – Free of Medication Error Rates of 5% or More
F602 – Free from Misappropriation/Exploitation	F692 – Nutrition/Hydration Status Maintenance	F760 – Residents are Free of Significant Med Errors
F603 – Free from Involuntary Seclusion	F693 – Tube Feeding Management/Restore Eating Skills	483.70 Administration

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F604 – Right to be Free from Physical Restraints	F694 – Parenteral/IV Fluids	F850 – Qualification of Social Worker >120 Beds
F605 – Right to be Free from Chemical Restraints	F695- Respiratory/Tracheostomy Care and Suctioning	483.80 Infection Control
F606 – Not Employ/Engage Staff with Adverse Actions	F696 – Prostheses	F883 – Influenza and Pneumococcal Immunizations
F607 – Develop/Implement Abuse/Neglect, etc. Policies	F697 – Pain Management	
F608 – Reporting of Reasonable Suspicion of a Crime	F698 – Dialysis	
F609 – Reporting of Alleged Violations	F700 - Bedrails	
F610 – Investigate/Prevent/Correct Alleged Violation		
483.24 Quality of Life		
F675 – Quality of Life		
F676 – Activities of Daily Living (ADLs)/Maintain Abilities		
F677 – ADL Care Provided for Dependent Residents		
F678 – Cardio-Pulmonary Resuscitation (CPR)		
F679 – Activities Meet Interest/Needs of Each Resident		
F680 – Qualifications of Activity Professional		

Extended Survey The purpose of the extended survey is to explore the extent to which structure and process factors may have contributed to systemic problems causing SQC. This is accomplished by further evaluating the facility’s compliance with all provisions at 483.30 Physician Services, 483.35 Nursing Services, 483.70 Administration, 483.75 QAPI, and if appropriate, 483.80 Infection Control and 483.95 Training Requirements. If the extended/partial extended survey was triggered by a deficiency in Quality of Care, conduct a detailed review of the accuracy of resident assessments (Refer to 483.20, Resident Assessment).

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Timing:

- The extended survey can be conducted:
- Prior to the exit conference, in which case the facility will be provided with findings from the standard and extended survey; or
 - After the standard survey but no later than 14 calendar days after the completion of the standard survey. If the extended survey is completed after the standard survey, documentation of non-compliance should be completed in the same survey shell. Do not upload the survey in ACO until the extended is completed.

Extended Survey Procedures:

- Was the Sufficient and Competent Nurse Staffing Review Facility Task completed for the standard/abbreviated survey in which SQC was found?
- Yes – Review findings from this task to determine if there were any structure or process concerns related to written policies/procedures, or sufficient or competent staff which may have contributed to the SQC.
- No – Conduct the Sufficient and Competent Nurse Staffing Review Facility Task with a focus on identifying structure or process concerns which may have contributed to the SQC identified on the survey.
- Was the Quality Assessment and Assurance (QAA) and Quality Assurance and Performance Improvement (QAPI) Plan Review Facility Task completed for the standard/abbreviated survey in which SQC was found?
- Yes – Review findings from this task to determine if there were any structure or process concerns related to the QAPI plan, or QAA committee improvement activities which may have contributed to the SQC.
- No – Conduct the QAA/QAPI Plan Review Facility Task with a focus on identifying structure or process concerns which may have contributed to the SQC identified on the survey.

In addition to the above tasks, determine whether structure or process concerns exist by referring to the regulations and guidance in Appendix PP of the SOM for each Ftag below:

483.30 Physician Services:

1. Is the facility in compliance with Resident's Care Supervised by a Physician? Yes No, F710
2. Is the facility in compliance with Physician Visits – Review Care/Notes/Order? Yes No, F711
3. Is the facility in compliance with Frequency of Physician Visits – Frequency/Timeliness/Alternate NPPs? Yes No, F712
4. Is the facility in compliance with Physician for Emergency Care, Available 24 Hours? Yes No, F713
5. Is the facility in compliance with Physician Delegation of Tasks to NPP? Yes No, F714
6. Is the facility in compliance with Physician Delegation to Dietitian/Therapist? Yes No, F715

483.70 Administration:

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1. Is the facility in compliance with Effective Administration? Yes No, F835
2. Is the facility in compliance with License/Comply with Fed/State/Local Law/Prof Std? Yes No, F836
3. Is the facility in compliance with Governing Body? Yes No, F837
4. Is the facility in compliance with the Facility Assessment? Yes No, F838
5. Is the facility in compliance with Staff Qualifications? Yes No, F839
6. Is the facility in compliance with Use of Outside Resources? Yes No, F840
7. Is the facility in compliance with Responsibilities of Medical Director? Yes No, F841
8. Is the facility in compliance with Resident Records – Identifiable Information? Yes No, F842
9. Is the facility in compliance with Transfer Agreement? Yes No, F843
10. Is the facility in compliance with Disclosure of Ownership Requirements? Yes No, F844
11. Is the facility in compliance with Facility Closure-Administrator? Yes No, F845
12. Is the facility in compliance with Facility Closure? Yes No, F846
13. Is the facility in compliance with Hospice Services? Yes No, F849
14. Is the facility in compliance with Qualified Social Worker > 120 Beds? Yes No, F850
15. Is the facility in compliance with Payroll Based Journal? Yes No, F851

Include a review of 483.80 Infection Control and/or 483.95 Training Requirements, as appropriate.