

## QIS Checklist

### Task 1: OFFSITE PREPARATION

#### Survey Team

##### Import Survey Shell

- 1. Obtain the survey shell from ACO, according to your State's procedures.  
**Note:** Refer to **Export Survey Shell** on the **QIS Checklist Addendum** for further instructions.  
Import the survey shell into ASPEN Survey Explorer (ASE) on all laptops.  
**Note:** Refer to **Import Survey Shell** on the **QIS Checklist Addendum** for further instructions  
Expand the **QIS Event ID** (🔍 icon) and expand **Team**.  
Confirm the Team Roster includes the correct surveyors. All laptops must have the same list of surveyors.  
**Note:** If the team roster needs revision, refer to **Team Roster** on the **QIS Checklist Addendum**.
- 2. Access the ASE-Q application through the right-click menu on the **Event ID**, then click **QIS Tool** at the bottom of the menu, or click **Citation Manager** at the top of the menu and select the **QIS Tool** button on the Citation Manager window.

#### Team Coordinator – on Primary Laptop

##### Review Materials

- 3. Obtain and review facility information for the Offsite Preparation Worksheet (CMS-20044) and document it in ASE-Q on the Review Materials screen. All documentation fields must be completed.  
**Note:** Refer to **Word Processing Functions** in the **QIS Checklist Addendum**.

##### Entrance Documents

- 4. Print or obtain the Entrance Documents as directed in ASE-Q to use upon entrance

##### Mandatory Facility Task Assignments

- 5. Make surveyor assignments for all mandatory facility tasks in ASE-Q.  
**Note:** If the team roster changes after these assignments are made, refer to **Reassigning Facility Tasks** on the **QIS Checklist Addendum**.  
**Note:** For further instructions, refer to **Surveyor Assignments** in the **QIS Checklist Addendum**.

#### Survey Team

##### Supplies and Set-Up

- 6. Each team member is responsible for bringing his/her laptop and peripherals (carrying case, power cord, extra battery packs, and flash drive)  
The team coordinator gathers and brings the following supplies:
  - Laptop and peripherals, including power strip(s) with surge suppressor
  - Printer, extra ink cartridges, printer paper (about half a ream),
  - Access to all survey worksheets (according to state procedures)
  - Facility folder or notebook to hold all forms provided to and by the facility and reports created in/printed from ASE-Q

##### Team Roster

- 7. Change the synchronization method to a wired network for team members who are not

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using the default method of USB (flash) drive.

**Note:** Skip this screen if everyone on the team is using the USB method.

**Note:** For instructions on synchronizing using the wired method, refer to **Synchronization Methods** on the **QIS Checklist Addendum**. Instructions for obtaining survey data when conducting FOQIS or compliance assessment activities are also listed there.

### Synchronize Offsite Prep Info and Assignments

8. Synchronize following the procedures described on the ASE-Q screen to push Offsite Prep Info and Assignments from the primary laptop to the secondary laptops. Each team member should initiate the Infection Control task and the Dining Observation task if they were not assigned the lead role by the Team Coordinator (the surveyor with the lead role, assigned by the Team Coordinator, will receive the assignment during the synchronization; other team members assisting with Infection Control and Dining must surveyor initiate these tasks in ASE-Q).

**Dependency:** Steps 1-5 and 7 must be completed before this step can be completed.

**Note:** Multiple surveyors may be checked if they are using the same synchronization type.

**Note:** For diagram instructions, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronize Primary Laptop to Secondary Laptops Using a USB Drive*.

## TASK 2: ONSITE PREPARATION

### Team Coordinator

#### Upon Entrance to the Facility

9. Immediately upon entrance to the facility:
- Request that the person in charge be notified of the team's entrance. Introduce the team.
- Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.
- Provide the Entrance Conference Worksheet (Facility Copy) (CMS-20045).
  - Request and explain the first five items under Information Needed Immediately Upon Entrance.
- Note:** Ask that the alphabetical resident census and the completed New Admission Information form be given as soon as possible to the surveyor assigned to reconcile the sample in the designated work area. Resident Reconciliation cannot start without them.

### Team Coordinator

#### Entrance Conference

10. After arrangements have been secured to obtain the facility's alphabetical resident census and New Admission Information form, conduct the Entrance Conference with the administrator or person in charge. Use the Entrance Conference Worksheet (QIS Team Copy) (CMS-20046) to guide the discussion.

**Note:** Record the date/time of the Entrance Conference and applicable notes in ASE-Q when the primary laptop is available.

**Note:** To see the full worksheet, right-click in the pane and select **Pop Up Display**.

### Assigned Surveyor - on Primary Laptop

#### Returned Resident Lists

11. The team coordinator assists the assigned surveyor set up the laptop designated as the primary laptop in the designated workspace, and:
- Enters the dates in ASE-Q on the Returned Resident Lists for Reconciliation screen as soon as the facility provides the alphabetical resident census and the New Admission Information Form, then
  - Completes the Resident Reconciliation screens in ASE-Q (See Step 13)
- Dependency:** The Returned Resident Lists for Reconciliation screen should be completed before beginning the Resident Reconciliation.

**Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.

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**Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.

### Assigned Surveyors – on Secondary Laptops

#### Initial Tour

- 12. Conduct an initial brief tour of the facility as soon as possible after entry and document tour information in ASE-Q. Introduce yourself to residents, family, and staff.

**Dependency:** The secondary laptops will not have access to the Initial Tour screen until Step 8 is completed.

**Note:** Refer to **Word Processing Functions** in the **QIS Checklist Addendum**. To document random notes, refer to **Surveyor Notes** in the **QIS Checklist Addendum**.

**Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.

### Assigned Surveyors – on Primary Laptops

#### Resident Reconciliation

- 13. Expand and follow the instructions on the Resident Reconciliation screen in ASE-Q to update the residency status for all residents in the Resident Pool using the facility's alphabetical resident census, replace discharged Census Sample residents, and enter unit/room numbers for sampled residents who are In Facility.

**Note:** Do not add a resident on the alphabetical resident census to the Resident Pool unless directed to.

**Note:** Cross-off or make a mark next to the residents on the New Admission Information form who are entered as replacements for discharged Census Sample residents.

**Note:** If the facility does not provide designations for the units, or the facility uses names for neighborhoods or households, create a simple or abbreviated designation (e.g., N for North) using the facility floor plan requested upon entrance to the facility.

**Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.

### Assigned Surveyor and Team Coordinator – on Primary Laptop

#### Stage 1 Assignments

- 14. The team coordinator assists the surveyor with assigning Census Sample residents in ASE-Q.

**Note:** The Stage 1 Assignment screen can be sorted by **Resident**, **Unit**, or **Room** to facilitate equitable distribution of residents by location. The default sort order is by unit and then by room. **Auto assign** is numerically by room numbers when units are not entered. For further instructions, refer to **Surveyor Assignments** in the **QIS Checklist Addendum**.

**Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.

### Survey Team

#### Synchronize Stage 1 Samples and Workload

- 15. Synchronize following the procedures described on the ASE-Q screen to push the Stage 1 Samples and Workload from the primary laptop to the secondary laptops.

**Note:** If the survey is starting at an off-hour, refer to **Off-Hour Survey Start** in the **QIS Checklist Addendum**.

**Note:** For diagram instructions, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronize Primary Laptop to Secondary Laptops Using a USB Drive*.

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### Team Coordinator – on Primary Laptop

#### Stage 1 Reports

16. Print both the facility copy and the team copy of the Admission Sample report.
- Dependency:** Step 14 must be completed before this step can be completed.
- Note:** For instructions on saving the reports, refer to **Saving ASE-Q Reports Electronically** in the **QIS Checklist Addendum**.
- Provide the Admission Sample Report – Facility to the person in charge. Request that the closed records related to the admission date listed on the form for each resident be delivered to the designated workspace within one hour.
- Note:** All the residents listed on the facility report were reconciled as discharged.
- On Admission Sample Report – Team, assign the residents who are still in the facility to surveyors based on location of Census Sample assignments, write in the assigned surveyor's name, and convey the information to the surveyors during the Initial Team Meeting. Leave this copy near the closed records once the facility provides them so that survey team members can initial/mark completed Admission Sample reviews.
17. The team coordinator may print copies of the Census Sample report or save the report electronically to a file designated for the facility/survey.
- Dependency:** Step 14 must be completed before this step can be completed.
- Note:** Surveyors at secondary laptops can view the Census Sample report onscreen in ASE-Q or save it electronically for viewing outside of the ASE-Q application.
- Note:** For instructions on saving the report, refer to **Saving ASE-Q Reports Electronically** in the **QIS Checklist Addendum**.

### Survey Team

#### Initial Team Meeting

18. Hold the initial team meeting after completing the Initial Tour, the Entrance Conference, and synchronizing the Stage 1 Samples and Workload. The team coordinator documents meeting notes in ASE-Q as the team discusses the following information:
- Dependency:** Steps 14 and 15 must be completed before this step can be completed.
- Note:** Use the **Save** button in the top right corner of the ASE-Q screen to ensure notes are not lost. Refer to **Word Processing Functions** in the **QIS Checklist Addendum**.
- Observed situations of concern during the Initial Tour;
- Note:** Anytime a surveyor suspects Immediate Jeopardy, he/she should alert the team. Follow the instructions on determining Immediate Jeopardy in Appendix Q of the SOM. Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.
- Availability of staff and staffing characteristics/patterns, and posting of the nurse staffing information;
- Note:** Staffing patterns include the type of shift the aides and nurses work and whether there are any specific staffing patterns the facility uses (12-hour shifts, etc.). Staffing characteristics include the use of any unique staff, such as paid feeding assistants, nurses from an outside agency, etc.
- Comparison of the staffing schedule provided by the facility to the names of licensed and registered nursing staff observed during the Initial Tour, and Entrance Conference information about nurse staffing waivers and the DON hours;
- Note:** If discrepancies exist between the schedule and the staff observed during the Initial Tour, ask the person in charge to explain the discrepancies.

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- Characteristics of the population;

**Note:** Characteristics of the population could include specialized units (dementia unit or psych population and whether the unit is locked or unlocked, and rehabilitation or Medicare units), younger population, higher incidence of individuals with MR, higher incidence of residents with increased needs/dependence (ventilators, respirators, comatose).

- Entrance Conference information (medication pass times, room variances, etc.)
- Assignments for Dining Observations based on the number and location of dining areas and for any residents who eat in their rooms

The team coordinator should also discuss with the team any concerns documented on the Offsite Preparation Review Materials screen (i.e., uninvestigated complaints, Ombudsman concerns) to decide what follow-up is necessary during Stage 1.

19. The team coordinator communicates:

- Assignments for Admission Sample residents who are not in the Census Sample and are not Discharged, and
- A target day and time for completion of Stage 1 Survey.

Discuss a plan for completing the required three family interviews during Stage 1.

### TASK 3: STAGE 1 SURVEY

#### Survey Team

#### Admission Sample

20. Conduct a preliminary investigation of the structured questions in the Record Review data source to collect resident-specific information for each resident according to the prescribed protocols:

- Use the structured questions and Additional Guidance in ASE-Q to gather consistent information for each care area in each data source.
- Document the applicable response for each question directly into ASE-Q as the information is gathered to increase accuracy.
- Answer the questions in the sequence in which they appear.

**Warning:** Documentation entered for a question answered out of sequence may be deleted if a question is subsequently answered that causes a skip for the question answered out of sequence.

- Document a **Relevant Finding** when the information suggests a negative response. Findings should include the date, time, the source of the information, and any details.
- Complete throughout Stage 1 when residents, family, staff are unavailable, and to the extent possible, on the unit in a location that affords confidentiality and continued observations.

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### Census Sample

21. Conduct a preliminary investigation of the structured questions to collect resident-specific information for each data source according to the following prescribed protocols:
- Use the structured questions and **Additional Guidance** in ASE-Q to gather consistent information for each care area in each data source.
  - Document the applicable response for each question directly into ASE-Q as the information is gathered to increase accuracy.  
**Note:** Document responses as given, even if there is a discrepancy between multiple data sources.
  - Answer the questions in the sequence in which they appear.  
**Warning:** Documentation entered for a question answered out of sequence may be deleted if a question is subsequently answered that causes a skip for the question answered out of sequence.
  - Document a **Relevant Finding** when the information suggests a negative response. Findings should include the date, time, the source of the information, and any details.
  - Be alert to the provision of care, staff-resident interactions, and quality of life for all residents.  
**Note:** To document random notes, refer to **Surveyor Notes** in the **QIS Checklist Addendum**.

#### Resident Observations of each resident:

- Meet residents as soon as possible to screen and answer the Cognitive Status question  
**Note:** If the resident's interview status is different from the Census Sample report, enter a relevant finding to explain the reason for this difference.
- Make multiple observations at various times of the day until all questions are answered; consider the situation and time of day.  
**Note:** Use **Surveyor Notes** to document interim observations, as needed, before answering the Stage 1 questions. Refer to the **QIS Checklist Addendum**.  
**Note:** If a sampled resident has left the facility and is not expected to return before the end of Stage 1 (e.g., discharged to the hospital), report to the team so a replacement resident can be assigned. (See **Replace a Resident** in step 22, Stage 1 Team Meetings).

#### Resident Interview or Family Interview (for three non-interviewable residents):

- Obtain permission from resident/family, schedule a time and location that assures privacy  
**Note:** Ask the Family Interview screening questions to determine whether the person being interviewed knows the resident well enough
- Ask questions exactly as written, use Additional Guidance to explain the intent of question, or adjust lengthy or multiple part questions while maintaining the intent.  
**Note:** Adjust the Family Interview questions as necessary to make them applicable to the resident and the person being interviewed
- Ask questions in sequence; may skip ahead if subject comes up out of sequence
- Ask probing open-ended questions if information provided is incomplete or unclear, to clarify or confirm your understanding, or to obtain more details about negative response.

#### Staff Interview for each resident:

- Schedule as convenient for the nurse in a private location with access to the records
- Verify documentation of neurogenic bladder and monitoring of nutritional supplement

#### Record Review for each resident:

- Complete throughout Stage 1 on the unit in a location that affords confidentiality and continued observations when residents, family, staff are unavailable  
**Note:** Do not code off-label medications that are not antipsychotics or benzodiazepines as "other antipsychotic" or "other benzodiazepine" when they are used to treat behavior.

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### Stage 1 Team Meetings

22. At the end of the first day and more often as necessary, the team coordinator documents meeting notes in ASE-Q as the team discusses the following:
- Note:** Use the **Save** button in the top right corner of the ASE-Q screen to ensure notes are not lost. Refer to **Word Processing Functions** in the **QIS Checklist Addendum**.
- Pertinent findings (i.e., negative responses) for both resident and facility tasks. Include a discussion of Offsite Preparation concerns if follow-up was conducted during Stage 1.  
**Note:** Report at least Stage 1 care areas with concerns. It is not necessary to report every resident or describe the details of every negative response. Reference the Relevant Findings report as desired under **Reports** in ASE-Q.
  - Whether any concerns suggest possible Immediate Jeopardy.  
**Note:** If so, follow the procedures in Appendix Q of the SOM. Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.
  - Whether any concerns suggest a high likelihood of rising to the level of harm.  
**Note:** Make note of the care areas related to the regulatory groupings of Resident Behavior and Facility Practices, Quality of Life, and Quality of Care.
  - Team progress and the workload remaining in Stage 1
  - Whether any Census Sample resident needs to be replaced;  
**Note: Replace a resident:**
    - A) On the Navigator menu, expand Onsite Preparation, select Resident Reconciliation
    - B) Change the residency status of the resident to **Discharged** on the screen
    - C) Follow step 7 in the instructions on the Resident Reconciliation screen.
    - D) Assign the resident on the **Stage 1 Assignments** screen.
    - E) D) Repeat step 15, Sync Stage 1 Samples and Workload, with only the secondary laptop(s) affected by the discharged and replaced resident.
  - How many family interviews have been completed and who might be available for interview, if three interviews have not yet been completed  
**Note:** Family interviews must be completed prior to the end of Stage 1.

### Stage 1 Daily Backup (optional)

23. At the end of each day in Stage 1, each surveyor makes a backup of his/her Stage 1 survey data.
- The secondary laptops complete the steps on the Sync Stage 1 Survey Data screen to the team coordinator's flash drive.  
**Note:** The team coordinator should NOT complete the steps on that screen to synchronize the secondary laptops to the primary laptop.
  - The team coordinator exports the survey event ID from ASE on the primary laptop to his/her flash drive, which serves as a backup of his/her Stage 1 survey data.

### Synchronize Stage 1 Survey Data

24. When all of the Stage 1 Survey Data is complete, synchronize following the procedures described on the ASE-Q screen to pull Stage 1 Survey Data from the secondary laptops to the primary laptop.

**Dependency:** Steps 20 and 21 must be completed before this step can be completed.

**Note:** For diagram instructions, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronize Secondary Laptops to Primary Laptop Using USB*.

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### TASK 4: FACILITY TASKS

#### Survey Team

#### Mandatory Facility Tasks

25. A. Reference the facility task pathway to guide an in-depth investigation of the mandatory facility tasks throughout the survey.
- Note:** To see the full pathway, right-click in the pathway pane and select **Pop Up Display**.
- Dependency:** The secondary laptops assigned to Initial Tour will not have access to the Mandatory Facility Tasks until Steps 5 and 8 are completed.
- Note:** For more information on initiating, reassigning, or removing tasks, refer to the **QIS Checklist Addendum** for instructions regarding **Initiating Facility Tasks**, **Reassigning Facility Tasks**, or **Removing a Facility Task**.
- B. Document negative findings in the **Investigative Documentation** field related to the applicable Critical Elements (CEs) but do NOT answer the CEs until the in-depth investigation is complete.
- Note:** Documentation should include relevant facts to make decisions regarding the CEs, Potential Citations, and severity/scope; and will serve as the foundation for the Statement of Deficiencies (CMS-2567). Use the **Regs** and **IG** buttons to reference the regulation and surveyor guidance.
- Note:** Refer to the **QIS Checklist Addendum** for information on **Word Processing Functions** (spell-check, copy/paste, etc), and how to include a Resident ID in Facility Task documentation (**Select Stage 2 Resident**).
- C. Complete step 38 to document a compliance decision for each CE.
- Note:** The assigned surveyor must answer all CEs. Surveyors who initiate a task answer only the CEs that were not met. Negative responses will override any positive responses when synchronized.
- Dining Observation The assigned surveyor should coordinate an investigation for the CE 6 Resident Sample with the surveyors assigned to the Food Quality Care Area if it triggers.  
**Note:** Surveyors assigned to dining locations during the Initial Team Meeting must initiate this task.  
**Warning:** The CE 6 Resident Sample field is specific to Food Quality. Do not select **Add Resident** until Stage 2. Replace residents populated in this field only with team consensus.
  - Infection Control & Immunizations: CE 10 Resident Sample is specific to the review for immunizations and is required Additional Information.  
**Note:** All surveyors must initiate this task to document concerns throughout the survey.
  - Kitchen/Food Service Observation: Conduct an Initial Brief Tour of the Kitchen during Onsite Preparation.
  - Liability Notices & Beneficiary Appeal Rights Review: CE1 Resident Sample (if the CE 1 is marked as yes) and CE 4 Resident Sample are required Additional Information and are specific to those CEs. Remove this task when the facility is not certified as a SNF.  
**Note:** Ask for a list of Medicare beneficiaries discharged from the SNF in the past 6 months if the issuance of a liability and appeal notice was not applicable to one or more of the sampled residents.
  - Medication Administration Observation: Only a nurse or pharmacist may complete this task. A minimum 50 opportunities is required Additional Information for a minimum of 10 residents.  
**Note:** If the resident is not listed in the drop down list, temporarily record the observation in the Surveyor Notes screen, and then follow the procedures for **Adding a Resident to the Pool** in the **QIS Checklist Addendum** under **Select Stage 2 Resident**.  
**Note:** Surveyors completing this task should communicate to ensure observations are conducted with several staff over different shifts/units, include multiple routes, and achieve the minimum counts.
  - Medication Storage: This task may be assigned to anyone on the team.

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- Quality Assessment and Assurance Review: A Yes or No response to CEs 3 and 4 is required if there are potential citations in the regulatory groups for Quality of Life, Resident Behavior and Facility Practice, and Quality of Care
- Resident Council President/Representative Interview: Remove this task when there is no Resident Council in the facility. Evaluate whether residents are allowed to organize a group.

**Note:** If the president/representative provides a negative response or does not know the answer to a question, record the response in the **Investigative Documentation** field, but do NOT answer the CE until the follow-up investigation is completed.

### Non-Mandatory Facility Tasks

26. A. Reference the facility task pathway to guide an in-depth investigation of the non-mandatory facility tasks in Stage 2 if triggered by Stage 1 interviews, observations, or record reviews. Initiate any of the following tasks to investigate offsite or onsite concerns that do not trigger.
- Note:** To see the full pathway, right-click in the pathway pane and select **Pop Up Display**.
  - Note:** Before starting the investigation, select the **View Stage 1 Info** button at the bottom of the Non-Mandatory Facility Task screen to review the resident information that triggered the task.
  - Note:** For more information on initiating, reassigning, or removing tasks, refer to the **QIS Checklist Addendum** for instructions regarding **Initiating Facility Tasks**, **Reassigning Facility Tasks**, or **Removing a Facility Task**.
- B. Document negative findings in the **Investigative Documentation** field related to the applicable Critical Elements (CEs) but do NOT answer the CEs until the in-depth investigation is complete.
- Note:** Documentation should include enough relevant facts to make decisions regarding the CEs, Potential Citations, and severity/scope; and will serve as the foundation for the Statement of Deficiencies (CMS-2567). Use the **Regs** and **IG** buttons as needed to reference the regulation and surveyor guidance.
  - Note:** Refer to the **QIS Checklist Addendum** for information on **Word Processing Functions** (spell-check, copy/paste, etc), and how to include a Resident ID in Facility Task documentation (**Select Stage 2 Resident**).
- C. Complete step 38 to document a compliance decision for each CE.
- Note:** The assigned surveyor must answer all CEs. Surveyors who initiate a task answer only the CEs that were not met. Negative responses will override any positive responses when synchronized.
- Abuse Prohibition Review: Staff Interview, Supervisor Interview, and New Employees samples are required
- Additional Information
- Note:** Initiate Abuse Prohibition Review for **Facility** if Abuse is initiated for a resident.
  - Admission, Transfer, and Discharge Review
  - Environmental Observations
  - Note:** All team members should observe for environmental concerns throughout the survey, document in **Surveyor Notes**, and report them during team meetings. Initiate the task based on team consensus and paste documentation from **Surveyor Notes** to the applicable CE.
  - Personal Funds Review
  - Sufficient Nursing Staff Review
  - Note:** If this task does not trigger, but concerns with nurse staffing requirements are identified during the Initial Team Meeting or Entrance Conference, initiate the task for the **Facility**.

### TASK 5: TRANSITION Stage 1 to Stage 2 (S1-> S2)

#### Team Coordinator – on Primary Laptop

#### Verification of Stage 1 Data

27. Follow the instructions on the ASE-Q screen to complete or explain the **Stage 1 Incomplete Admission/Census Data** items displayed in the grid.

**Dependency:** Step 24 must be completed before this step can be completed. If there is missing data, make the

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### TASK 5: TRANSITION Stage 1 to Stage 2 (S1-> S2)

corrections on the primary laptop or the applicable secondary laptop. If corrections are completed on the secondary laptop, that laptop should again complete step 24.

**Note:** If data is not available to complete the item, the primary laptop must document an explanation. For example, "The resident interview was interrupted and could not be resumed."

#### QCLI Results

28. Click on the **Calculate QCLI Results** button on the QCLI Results screen.

**Dependency:** Step 27 must be completed before this step can be completed.

#### Survey Team

##### Synchronize Stage 1 and QCLI Data

29. Synchronize following the procedures described on the ASE-Q screen to push the Stage 1 and QCLI Data from the primary laptop to the secondary laptops.

**Dependency:** Step 28 must be completed before this step can be completed.

**Note:** For diagram instructions, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronize Primary Laptop to Secondary Laptops Using a USB Drive*.

#### Transition Meeting

30. The primary objective of this meeting is to discuss the concerns associated with each triggered Care Area and the extent of the QCLI calculations in relation to the thresholds. Each surveyor views the QCLI Results screen on his/her own laptop to discuss each Care Area.

**Dependency:** Step 29 must be completed to make this possible.

The Team Coordinator navigates between the QCLI Results screen and the Transition Meeting screen to document the following critical issues throughout the team discussion:

**Note:** A completion criteria message will appear when moving from the Transition Meeting screen to the QCLI Results screen if all documentation fields are not completed.

**Note:** Use the **Save** button in the top right corner of the ASE-Q screen to ensure notes are not lost. Refer to **Word Processing Functions** in the **QIS Checklist Addendum**.

- Concerns that suggest possible Immediate Jeopardy  
**Note:** Follow the instructions on determining Immediate Jeopardy in Appendix Q of the SOM.
- Concerns with a high likelihood of rising to the level of harm that may need sample supplementation to investigate for substandard quality of care in the regulatory groups of Resident Behavior and Facility Practices, Quality of Life, and Quality of Care
- Concerns related to residents and Care Areas that do not trigger and that may need to be initiated into the Stage 2 sample (e.g., offsite complaints; concerns outside of the Stage 1 samples; concerns discussed during the Initial or Stage 1 team meetings; or Care Areas that are not associated with a QCLI)  
**Note:** The following Care Areas do not have QCLIs: Bowel Incontinence, Colostomy, Communication and Sensory Problems, Fecal Impaction, Foot Care, Ileostomy, Parenteral Fluids, Prosthesis, Respiratory Care, Tracheal Suctioning, Tracheostomy, and Ureterostomy
- Stage 1 data entry errors, including the surveyor, resident, data source, and the question to be corrected

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### TASK 5: TRANSITION Stage 1 to Stage 2 (S1-> S2)

#### Team Coordinator – on Primary Laptop

##### Correct Data Entry Errors

- A) Click on the drop-down arrow to the right of **Current Surveyor** in the top toolbar and select **All Surveyors**.
- B) Expand the Navigator menu for Stage 1 Survey to the applicable residents and data source questions. Change the data entry according to the necessary corrections.  
**Note:** If there are numerous data entry errors documented on the Transition Meeting screen, the documentation field could be printed so the team coordinator does not need to navigate between the Transition Meeting screen and the Stage 1 Survey screens. Right click in the documentation field, select **Full Screen Display**, and select the **Print** icon.
- C) Change the drop down arrow back to **Current Surveyor**.
- D) Repeat step 28. Review just the affected Care Areas to confirm the corrections were achieved.

#### Survey Team

- E) Repeat step 29.

**Note:** The secondary laptops must refresh the QCLI Results screen.

#### Team Coordinator – on Primary Laptop

##### Transition Reports

31. The team coordinator may print a copy of the **Stage 1 Relevant Findings** report and the **QCLI Results Report** or save the reports electronically to a file designated for the facility/survey.  
**Dependency:** Step 29 must be completed before this step can be completed.  
**Note:** For instructions on saving the reports, refer to **Saving ASE-Q Reports Electronically** in the **QIS Checklist Addendum**.

##### Stage 2 Sample Review/Finalization

32. On the Stage 2 Assignment screen, select the **Care Area** view, and expand each Care Area to discuss which residents were sampled by ASE-Q for each Care Area and to identify whether to initiate additional residents.  
**Dependency:** Step 30 must be completed before this step can be completed.
33. Initiate the additional residents and Care Areas or F tags as applicable for the following:  
**Note:** Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.
- Any Stage 1 resident who met the QCLI criteria for a triggered Care Area and has a potentially egregious concern but was not selected by ASE-Q for the Stage 2 Sample.
  - Any resident and Care Area for concerns identified during the Transition Meeting according to Step 30.  
**Note:** If there were numerous concerns documented on the Transition Meeting screen, the documentation field could be printed so the team coordinator does not need to navigate between the Transition Meeting screen and the Stage 1 Survey screens. Right click in the documentation field, select **Full Screen Display**, and select the **Print** icon.
  - One resident, as available, for the Care Areas listed on pages 3 and 4 of the Entrance Conference Worksheet (Facility Copy); Preadmission Screening and Resident Review (PASSR), Ventilator, Dialysis, and Certified Medicare Hospice and/or End of Life Services.  
**Note:** A resident could be listed on the form and initiated for more than one Care Area.

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- The applicable Resident Room Care Area for the residents residing in rooms affected by the variances identified during the Entrance Conference.
- F356 if nurse staffing information is not posted and/or Sufficient Nursing Staff Review, as applicable, if discrepancies exist between the schedule and staff observed during the Initial Tour or information obtained during the Entrance Conference about nurse staffing waivers and DON hours
- Tag F155 for any residents involved in experimental research occurring in the facility identified during the Entrance Conference.
- Residents and Care Areas as applicable related to the concerns documented on the Offsite Preparation Review Materials screen.

**Note:** Refresh the Stage 2 Assignment screen after initiating the applicable residents and Care Areas/F Tags.

34. Sort the **Unassigned Stage 2 Residents** list by resident to identify any Stage 2 residents with missing units and room numbers. Go back to the Resident Reconciliation screen and enter the units and room numbers that are missing.

### Stage 2 Assignments

35. Assign a surveyor to every Stage 2 resident, Care Area, and Non-mandatory Facility Task using the following guidelines to achieve an equitable workload (number and location):

**Dependency:** This step should not be completed until Steps 32-34 have been completed.

- Reassign initiated residents and Care Areas as needed. The ASE-Q automatically assigns them to the surveyor who initiated the Care Area.
- Assign Stage 1 residents to their Stage 1 assigned surveyor. Consider adjusting the assignment of specific Care Areas based on surveyor expertise and to balance the number of Care Areas and residents assigned to each surveyor.

**Note:** Consider surveyors' clinical knowledge and skills. Only a surveyor who is a licensed nurse, physician's assistant, or physician may observe a resident's genitals, rectal area, or female breast area.

- Adjust facility task assignments as necessary based on which surveyors have concerns and to balance the workload for each surveyor.

**Note:** Do not adjust Mandatory Facility Tasks Assignments by reassigning them on the Stage 2 Assignment screen. Refer to **Reassigning Facility Tasks** on the **QIS Checklist Addendum**.

**Note:** The **Auto Assign** button may be used to distribute the assignments to achieve an equal distribution of workload; however, the **Auto Assign** functionality does not consider surveyor expertise or the complexity of assignments.

**Note:** For further instructions, refer to **Surveyor Assignments** in the **QIS Checklist Addendum**.

### Survey Team

#### Synchronize Stage 2 Sample and Assignments

36. Synchronize following the procedures described on the ASE-Q screen to push the Stage 2 Sample and Assignments from the primary laptop to the secondary laptops.

**Dependency:** Step 35 must be completed before this step can be completed.

**Note:** For diagram instructions, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronize Primary Laptop to Secondary Laptops Using a USB Drive*.

## QIS Checklist

### TASK 6: STAGE 2 SURVEY

#### Survey Team

#### Stage 2 Care Area Investigations

37. Conduct an in-depth, directed investigation of the triggered and initiated Care Areas using investigative protocols.
- Dependency:** Step 36 must be completed before this step can be completed.
- Note:** Finalize Task 4, Facility Tasks, by completing the Mandatory Facility Tasks and the triggered or initiated Non-Mandatory Facility Tasks (see steps 25 and 26).
- Review the QCLI Results and Relevant Findings on the ASE-Q **Resident Summary** tab to focus the investigation and build on the Stage 1 information that caused the Care Area to trigger.  
**Note:** For Care Areas triggered by MDS-based QCLIs, refer to the QCLI dictionary to identify the applicable MDS section. Close ASE-Q. In ASE, expand the Residents MDS 3.0 node under the event ID. Select the resident, click on the tab for the applicable MDS section. Identify the assessment dates with coding changes related to the Care Area to focus the investigation.
  - Develop a strategy for proceeding through the assigned Care Area investigations to organize and manage the workload and not miss critical observations and interviews.  
**Note:** Begin observations and interviews as soon as possible, and conduct across several shifts as applicable for the assigned care areas. Uphold interview confidentiality. Limit record review to obtain specific information and validate observations and interviews.  
**Note:** If an assigned Care Area needs to be removed or a sampled resident replaced (e.g., Stage 1 information is inaccurate), report it to the team so a replacement resident can be assigned.
  - Use the investigative protocol as directed by ASE-Q to guide the investigation, i.e., Critical Element (CE) Pathway or F tag Guidance to Surveyors.  
**Note:** Use the buttons for **View CE Pathway, Regulations, and Interpretive Guidelines** throughout the investigation to ensure a complete investigation.
  - Document detailed information in the **Investigative Documentation** field at the applicable location in ASE-Q. Do NOT answer the CEs until the in-depth investigation is complete.  
**Note:** Documentation should include enough relevant facts to make decisions regarding the CEs, Potential Citations, and severity/scope; and will serve as the foundation for the Statement of Deficiencies (CMS-2567). Use the **Regs** and **IG** buttons as needed to reference the regulation and surveyor guidance.  
**Note:** Refer to the **QIS Checklist Addendum** for information on **Word Processing Functions** (spell-check, copy/paste, etc).
  - Complete step 38 to document a compliance decision for each CE.
  - If concerns are identified with an Independent but Associated Structure, Process, and/or Outcome Requirement on the **Related Requirements** tab, click on the **Initiate Care Area** button. Investigate further to make a supportable compliance decision.  
**Note:** Always initiate the related Care Area rather than an F tag. The initiated Care Area or F tag will appear under Stage 2 Survey on the Navigator menu. If it does not appear, refresh the screen.
  - Be alert to the provision of care, staff-resident interactions, and quality of life for all residents.  
**Note:** If concerns are identified for randomly observed residents, document those concerns in **Surveyor Notes** (under **Options** on the menu bar) and report to the team. As needed, paste documentation from **Surveyor Notes** to an initiated Care Area or F tag. **Warning:** Surveyor Notes are not retained with the survey shell.  
**Note:** Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.

## QIS Checklist

### TASK 6: STAGE 2 SURVEY

#### Critical Element (CE) Compliance Decisions

38. Document a compliance decision using the CE radio buttons for each CE for all assigned Care Areas, F tags, and Facility Tasks.

- Use the applicable CE Pathway and/or F tag Guidance to Surveyors to guide the compliance decisions. Select the **Regulations** and **Interpretive Guidelines** buttons as needed.
- Answer the applicable CE radio button to document a CE compliance decision. A CE marked as “No” suggests noncompliance with the applicable requirement. The **Investigative Documentation** will pull forward into the **Potential Citations Documentation** field.

**Note:** For Stage 2 Care Area Investigations, click on the **Compliance Decision** button on the tabs for **Assessment**, **Care Plan**, and **Provision of Care**. The applicable CE for the selected tab displays as enabled on the **Compliance Decision** window.

**Warning:** When a CE compliance decision is changed to Yes, the F tag in the **Potential Citations** pane, the documentation in the **Potential Citations Documentation** field, and the severity decision will be removed. If more information is obtained after answering the CE, document that information in the **Investigative Documentation** field. To move that documentation forward into the **Potential Citations Documentation** field, copy and paste it or change the CE response from No to Yes and back to No.

- Revise the **Potential Citations Documentation** as needed according to the Principles of Documentation, ensuring that “The facts and findings relevant to the deficient practice, answer the questions: who, what, where, when, and how.”(Principle #3C)

**Note:** For Stage 2 Care Area Investigations, all of the Assessment, Care Planning, and Provision of Care investigative documentation will pull forward to the Potential Citations Documentation field for each CE marked as noncompliant. Revise the documentation so each potential citation includes only that which is relevant to the applicable F tag.

- Select a **Severity** that is supported by the Potential Citations Documentation.

**Note:** Refer to the severity guidance and Psychosocial Outcome Severity Guide in Appendix P and the DEFICIENCY CATEGORIZATION section of the Investigative Protocol for select F tags in Appendix PP (F248, F249, F309, F314, F315, F323, F325, F329, F334, F371, F373, F425, F428, F431, F441, F501, and F520).

#### Stage 2 Team Meetings

39. At least daily and more often as necessary, the team coordinator documents meeting notes in the ASE-Q as the team discusses the following:

**Note:** Use the **Save** button in the top right corner of the ASE-Q screen to ensure notes are not lost. Refer to **Word Processing Functions** in the **QIS Checklist Addendum**.

- Findings related to potential noncompliance for both Care Area and Facility Task assignments.
- Whether any findings suggest possible Immediate Jeopardy (IJ) or have a high likelihood of rising to the level of harm

**Note:** If IJ is suggested, follow the instructions on determining Immediate Jeopardy in Appendix Q of the SOM. Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.

**Note:** If all three sampled residents for the care areas related to the regulatory groupings of Resident Behavior and Facility Practices, Quality of Life, and Quality of Care demonstrate potential for noncompliance, supplementing the Stage 2 Sample for the related Care Areas.

**Supplement a Care Area:**

## QIS Checklist

### TASK 6: STAGE 2 SURVEY

- A) On the Navigator menu, expand Transition S1->S2, and select QCLI Results.
- B) Expand the Care Area, the QCLIs Exceeded Threshold, and the QCLI Criteria Met.
- C) Select one or more resident(s) in the list who is not sampled for the Care Area.
- D) Initiate the Care Area for the replacement resident: Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.
- E) Assign the supplemental resident(s) on the Stage 2 Assignment screen.  
**Note:** Refer to the Stage 2 Report by Care Area to determine whether the supplemental resident(s) is already assigned to another surveyor in Stage 2.
- F) Repeat step 36 with the affected secondary laptops.

- Whether an investigation for a care area is complete and the potential for noncompliance at a particular tag exists to request additional information from the facility before the team makes the final compliance decision.

**Note:** Refer to CMS Admin Info 08-32 for more information.

- If there are potential quality concerns that require the need to conduct Part 2 of the Quality Assessment and Assurance Review. Additionally, discuss the progress of other facility tasks (e.g., the count of errors and opportunities for Medication Administration Observations) and whether concerns need further investigation (e.g., dining concerns or infection control observations).
- If there is a need to remove a care area for a resident in the Stage 2 sample and substitute with another resident who meets the criteria for the applicable QCLI for that Care Area.  
**Note:** Refer to **Removing a Care Area** in the **QIS Checklist Addendum**.
- Team progress, workload remaining in Stage 2, and the need to adjust assignments.  
**Note:** If there is a need to make assignment adjustments, refer to Addendum section Incorrect Assignments after Stage 2 Synch.

### Stage 2 Daily Backup (optional)

- 40. At the end of each Stage 2 day, each surveyor makes a backup of his/her Stage 2 survey data.
  - The secondary laptops complete the steps on the Sync Stage 2 and Facility Task Data screen to the team coordinator's flash drive.  
**Note:** The team coordinator should NOT complete the steps on that screen to synchronize the secondary laptops to the primary laptop.
  - The team coordinator exports the survey event ID from ASE on the primary laptop to his/her flash drive, which serves as a backup of his/her Stage 1 survey data.

### Synchronize Stage 2 and Facility Task Data

- 41. Synchronize following the procedures described on the ASE-Q screen to pull the Stage 2 and Facility Task Data from the secondary laptops to the primary laptop.  
**Dependency:** Step 38 must be completed before this step can be completed.  
**Note:** For diagram instructions, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronize Secondary Laptops to Primary Laptop Using USB*.

## QIS Checklist

### TASK 7: STAGE 2 ANALYSIS

#### Team Coordinator – on Primary Laptop

##### Verification of Stage 2 Data

42. Follow the instructions on the ASE-Q screen to complete the incomplete items displayed in the grids for Mandatory Facility Tasks and/or Stage 2 residents or non-mandatory facility tasks, and to complete or explain the incomplete count for Additional Information.

**Dependency:** Step 41 must be completed before this step can be completed. If the incomplete data includes all of the assignments from a secondary laptop, that laptop should complete step 41 again.

**Warning:** Do not complete partial data on secondary laptops and re-synchronize. Complete partial data on the primary laptop.

**Note:** If the Medication Administration error rate is 5% or less, any potential citations under F332 should be removed (change the CE response to Yes on the primary laptop) or marked as not cited on the Potential Citation screen.

**Note:** If data cannot be obtained for **Additional Information Incomplete Data**, the primary laptop must document an explanation.

#### Survey Team – on Primary Laptop

##### Stage 2 Analysis and Decision Making Meeting

43. The primary objective of this meeting is to discuss the Potential Citations and accompanying documentation resulting from Facility Task and Stage 2 investigations to determine whether noncompliance exists.

**Note:** This step is completed concurrently with step 44.

The Team Coordinator navigates between the Potential Citation screen and the Stage 2 Analysis and Decision Making screen to document the following critical issues identified during the team discussion:

**Note:** A completion criteria message will appear when moving from the Stage 2 Analysis and Decision Making meeting screen to the Potential Citations screen if not all documentation fields are completed.

**Note:** Use the **Save** button in the top right corner of the ASE-Q screen to ensure notes are not lost. Refer to **Word Processing Functions** in the **QIS Checklist Addendum**.

- Concerns that suggest possible Immediate Jeopardy
- Concerns related to residents and Care Areas in the regulatory groups of Resident Behavior and Facility Practices, Quality of Life, and Quality of Care.
- The need for sample supplementation to investigate for substandard quality of care
- The need to initiate the Extended Survey care area.

**Note:** Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum**.

##### Potential Citations

44. The team coordinator completes the documentation on the Potential Citation screen in ASE-Q in accordance with the team's analysis and decision making as follows:

**Dependency:** Step 42 must be completed before this step can be completed.

**Note:** During this team analysis, one member of the team should make notes of the potential citations and associated residents to assist with completing step 45.

- Expand each tag and the findings under the tag in **Potential Citations** list on the left pane to analyze the Surveyor Documentation in the right pane and to make a citation decision.

## QIS Checklist

**Note:** Use the **Regulations** and **Interpretive Guidelines** buttons to review the surveyor documentation against the language of the regulation and the guidance to surveyors.

- If the team's consensus is to cite the tag:
  1. Check the resident or facility findings to include in the Potential Citation from the list in the left pane.

**Note:** If during this review the team would like to add a resident to a citation, the team coordinator should switch to **All Surveyors**, expand Stage 2 Survey to the applicable resident, and change the compliance decision.
  2. Select the radio button for **Cite** in the right pane.
  3. Press the **S/S** button and the applicable **S/S** button on the Severity and Scope window.

**Note:** Refer to the severity and scope guidance in Appendix P, section IV Deficiency Categorization, and to the Deficiency Categorization section of the Investigative Protocol in Appendix PP for select F tags (F248, F249, F309, F314, F315, F323, F325, F329, F334, F371, F373, F425, F428, F431, F441, F501, and F520)
  4. Document the information in the **Opening Statement** documentation field that is necessary for the Deficient Practice Statement according to the Principles of Documentation (e.g., failed practice, extent and universe)
- If the team's consensus is to not cite the tag:
  1. Select the radio button for **Don't Cite** in the right pane.
  2. Select a **Reason for Not Citing** from the drop down list.

**Note:** When **Reason 1** is chosen, select the tag from the Other Tag drop down list. When **Reason 6** is chosen, provide more information as to why the Potential Citation was not cited in the "Reason" documentation field.

### Team Coordinator – on Primary Laptop

#### Reports

- 45. Click on **Print** to open the Potential Citation Report and the Stage 2 Sample Resident List.

**Dependency:** Step 44 must be completed before this step can be completed.

  - Review both reports to ensure all intended citations and all sampled residents are listed.
  - Print the Potential Citation report for use during the Exit Conference.
  - Print a copy of the Stage 2 Sample Resident List to provide to the facility's administrator or designated person in charge.

**Note:** These reports may be saved electronically to a file designated for the facility/survey. For instructions on saving the reports, refer to **Saving ASE-Q Reports Electronically** in the **QIS Checklist Addendum**.

**Note:** The Stage 2 Report by Care Area listed under the **Reports** button on the top menu bar may also be saved to assist the survey team that conducts the post-survey revisit.

#### Transfer Citations to ASE

- 46. Close the ASE-Q application. Right-click on the **Event ID** in ASE. Select **Citation Manager**. On the Citation Manager window, click the **Load Cites** button to upload the citations from the ASE-Q application into ASE.

#### Complete Survey Backup

- 47. Export the Event ID to the team coordinator's flash drive (this will be the backup of the entire ASE-Q documentation for all surveyors).

## QIS Checklist

### Exit Conference

- 48. Conduct the exit conference with facility personnel. Invite the Ombudsman and an officer of the organized residents' group, if one exists, and additional residents who expressed interest in attending the exit conference. Provide a separate abbreviated exit conference specifically for residents after completion of the normal facility exit conference, if the organized residents' group and/or additional residents expressed interest in attending the exit conference.

**Dependency:** Step 44 must be completed before this step can be completed.

**Note:** Refer to Appendix P for additional information regarding the Conduct of the Exit Conference.

### POST-SURVEY DOCUMENTATION

#### Completion of the CMS-2567L in ASE on laptops

**Note:** If the final editing is completed in ACO by all team members, skip ahead to step 54 and then complete step 50.

#### Team Coordinator – on Primary Laptop

- 49. Import the Event ID exported to the team coordinator's flash drive in step 47.

#### Survey Team

- 50. Complete the final editing of the CMS-2567 according to the Principles of Documentation.

#### Team Members – on Secondary Laptops

- 51. Export final edited version of the Event ID from ASE to the flash drive.

#### Team Coordinator – on Primary Laptop

- 52. Import each surveyor's final edited version of the Event ID in ASE on the primary laptop.

**Note:** On the Compare screen:

- Select **Use Source** to replace the current text in the primary laptop with the surveyor's edited text.
- Select **Use Destination** to retain the current text in the primary laptop rather than importing the surveyor's edited text.

- 53. Export a final copy of the Event ID to the team coordinator's flash drive.

- 54. Import the final version of the survey event ID to ACO from the team coordinator's flash drive according to your State's procedures.

**Note:** If team composition has changed, update ACO.

**Note:** For diagram instructions on how to import the survey shell into ACO, refer to ASPEN 10.0 QIS IT Training Guide Importing Survey into ACO.

- 55. Copy the facility folder from the team coordinator's flash drive to the designated directory on the State's network according to your State's procedures.

#### Survey Team – on all laptops

- 56. After the survey is exported to ACO according to your State's procedures
  - A) Delete the survey from ASE.
    - Expand the Survey tree to the Facility and Event ID
    - Right-click on the **Event ID**.

## QIS Checklist

- Select **Send To**, select **Recycler**.
  - Select **Yes** at the message, “Are you sure you want to send this survey (Event ID) to the ASPEN Recycler?”
- B) Delete the survey from the ASE Recycler
- Expand the **Recycle** listing.
  - Right-click the **Event ID**
  - Select **Delete**.
  - Select **Yes** at the message, “Are you sure you want to permanently remove this facility’s recycled surveys?”

## Addendum

### ASE-Q Application HELP

Contact the designated state technical lead according to your state procedures for any hardware or software difficulties.

**Note:** If an “**unhandled exception**” error message occurs while using the ASE-Q application, make a print screen of the message. While still on the screen with the message displayed, press the Function [**Fn**] key and the Print Screen [**Prnt Sern**] key. Open a **Word** document and paste the print screen [**Ctrl+V**]. Describe in the Word document the actions being completed just before the error message. Send the document to your state technical lead.

Do **NOT** select **Continue** on the error message. Close the ASE-Q application to clear the message before proceeding. (It is not necessary to close ASE).

If the designated state technical lead is not available and the technical difficulty stops the survey process, contact the QTSO Help Desk (1/888/477-7876).

**Note:** Inform the Help Desk responder that the contact is about a Quality Indicator Survey and immediate assistance is required.

For questions about the QIS process, refer to the SOM Appendix P and the QIS Checklist for answers. As necessary, contact your state CMS certified QIS trainer for additional support.

### Export Survey Shell

**Note:** For diagram instructions, refer to the ASPEN 10.0 QIS IT Training Guide, *Exporting the Survey and MDS Data from ACO to a Transfer File*.

1. If you are using a USB drive to export the survey shell, insert the USB drive into your laptop.
2. In the ACO tree, locate and expand the certification kit containing the survey.
3. Click on the **QIS Event ID** (🔍 icon), and drag it to the **Export** button on the toolbar (or right-click the survey and select **Send to**, then **Export**).
4. In the **Export** window, specify your transfer location, and then click **OK**.

**Note:** Select **ASPEN Transfer Location** if exporting to Drive (C:); Use **Other Location** to navigate to a different drive.

**Note:** ASPENTx.zip is the default export transfer file name. Enter another name per State procedures.

5. Select the desired **QIS Event ID** on the **Survey Export** window.

**Note:** Single surveys are pre-selected for transfer.

6. Click **Continue with Export** to initiate the transfer.

**Note:** ACO transfers the survey shell then begins calculating the QIS data. This may take several minutes. You cannot cancel the export during the calculations.

**Note:** A **QIS Calculations** message will appear if the event ID has been exported previously. If the Exit date was changed, select **Yes**; otherwise select **No**.

7. Click **Apply** on the **Finalize Transfer** window to complete the transfer to the zip file.

## QIS Checklist

### Import Survey Shell

**Note:** For diagram instructions, refer to the ASPEN 10.0 QIS IT Training Guide, *Importing the Survey and MDS Data from the Transfer File into ASE-Q*.

1. Insert the USB drive containing the ASPEN transfer file (i.e., survey shell) into your laptop.
2. Open ASE-Q by double clicking the desktop icon (📁) and login.

**Note:** Select **OK** if you receive the message, “ASPEN cannot verify that a required disk encryption system is installed on this computer. Please contact your system administrator.”

3. Select **Import** button on the ASE-Q toolbar.
4. On the **Import** window, navigate to the ASPEN transfer file on the USB drive, and then click **OK**.

**Note:** If you select **ASPEN Transfer Location** for the USB drive, the file must be called **ASPENTx.zip** and must be in the root of the USB drive. If the file has been renamed or is in a folder, select **Other Zip File Location** and click on binoculars to navigate to the file.

5. On the **Survey Import** window, mark the checkbox next to the **Event ID** you want to transfer, and then select **Continue with Import**.

**Note:** If the survey has been exported before, you will see a **Merge Fields** window. Decide if you want to use the source or destination information, and then select **Continue with Transfer**.

**Note:** If the QIS data already exists on the destination, you will receive the message: "QIS data already exists on destination; do you wish to overwrite with new data?" Answer **No** to keep the QIS data on the destination or answer **Yes** to replace QIS data on destination with data from source. You may receive a second message if you have QIS response data in your database. The second message is intended to make sure you do not accidentally overwrite complete QIS survey data.

6. In the **Finalize Transfer** window, select **Apply** to complete the import.

### Initiating Care Areas/F Tags/ Facility Tasks

**Initiating Care Areas/F tags:** Always initiate the applicable Care Area rather than an F tag. Select **Options** on the top menu bar, select **Initiate Care Area/Tag**, select the applicable Care Area from the **QCLI Based Care Areas** list or an F tag from the **F Tag Direct Cite** list in the left pane, select the applicable resident in the right pane, and click **Include**.

**Note:** A warning message will alert when an F tag has an associated Care Area.

**Initiating Facility Tasks:** Additional surveyors can share the workload for any task with the assigned surveyor. Select **Options** on the top menu bar, select **Initiate Care Area/Tag**, select the facility task from the **QCLI Based Care Areas** list on the left pane, select **Facility** on the right pane, and click **Include**.

**Note:** A warning message will alert when there is an attempt to initiate a facility task for a resident or initiate a resident Care Area for Facility.

**Note:** More than one Care Area, Facility Task, or F tag can be selected and moved at one time. Hold down the Control [**Ctrl**] keyboard button while selecting all applicable items in the left pane. Select the applicable item in the right pane. Click the **Include** button to move all selected items to the item in the right pane, or Drag-and-Drop them using the left-click and mouse pad.

## QIS Checklist

### Off-Hour Survey Start

- Complete the Upon Entrance requests (step 9) with the designated person in charge.
- Conduct the Entrance Conference (step 10) with the designated person in charge. Conduct a follow-up Entrance Conference with the administrator as needed upon his/her arrival at the facility.
- If the staff in the facility upon entry cannot provide a current alphabetical resident census and/or complete the New Admission Information Form (step 11), obtain whatever resident information is available. Do NOT record the dates on the Returned Resident Lists screen in ASE-Q until the complete alphabetical resident census and/or New Admission Information Form is provided.
- Modify the Initial Tour (step 12) as necessary to accommodate the residents' activities occurring at the time of entry. Conduct the initial brief Kitchen/Food Service observation as able and begin other facility tasks as appropriate.
- Select Census Sample on the Resident Reconciliation screen (step 13). Do NOT mark any Census Sample resident as discharged. Select In Facility in the Residency Status column for all Census Sample residents who are confirmed in the building. Enter Unit and Room # for those residents. .
- Make a partial assignment of the Census Sample residents who are confirmed in the building (step 14), so there is no extended delay in starting Stage 1 Survey.
- Synchronize the Stage 1 Samples and Workload (step 15) to enable the secondary laptops to begin completing the Stage 1 data sources, as able, for the partially assigned residents.

### Reassigning Facility Tasks

- If the surveyor assigned to a Mandatory Facility Task during Offsite Preparation is taken off the survey team prior to Onsite Preparation, refer to the **Note in Team Roster** below.
- To make reassignments of facility tasks during the survey, the reassigned surveyor should initiate the task. The original surveyor will leave the task as incomplete. **Do not remove the facility task.**

### Removing a Care Area/Facility Task

**Removing a Care Area:** Discuss removal of Care Areas at the Stage 2 Team Meetings. If a Care Area is removed, a replacement resident must be selected.

**Note:** Removing a Care Area should be rare. It may be necessary when a Care Area is identified as not relevant for the resident or adequate investigation is not possible due to a resident's hospitalization or discharge.

**Removing Facility Tasks:** A facility task must ONLY be removed when it is being removed from the survey (i.e., not applicable in that facility). The task must be removed from each laptop in which it appears as an assignment.

To remove a Care Area or Facility Task:

1. Select **Options, Initiate Care Area/Tag**
2. Select the Care Area/Task under the applicable resident/Facility on the right pane
3. Click the **Remove** button to move the Care Area/Task to the left pane

## QIS Checklist

4. If any documentation was entered, a warning message will appear. Click the desired response. **Note:** The CE compliance decisions, all F tags in the Potential Citations pane, all of the documentation in the Potential Citations Documentation field, and all severity decisions will be removed. The Investigative Documentation will be retained.
5. Select an option on the **Reason for Removal** window.

To replace the removed Care Area with another resident:

1. On the Navigator menu, expand Transition S1->S2, select QCLI Results.
2. Expand the **Care Area**, the **QCLIs Exceeded Threshold**, and the **QCLI Criteria Met**.
3. Select a resident who is already in the Stage 2 Sample, if possible. If no current residents are available, select a new resident.
4. Initiate the Care Area for the replacement resident: Refer to **Initiating Care Areas/F Tags/Facility Tasks** in the **QIS Checklist Addendum** above.
5. Assign the replacement resident on the Stage 2 Assignment screen.  
**Note:** Refer to the Stage 2 Report by Care Area to determine whether the replacement resident is already assigned to another surveyor in Stage 2.
6. Repeat step 36 with the affected secondary laptops.

### Incorrect Assignments after Stage 2 Sync

After you finish Stage 2 Assignments and perform the Sync Stage 2 Sample & Assignments step with the secondary tablets, you realize the assignments are incorrect on the secondary tablets.

**Resident Missing From Stage 2 Assignments:** If a new resident is added on the primary tablet during Stage 1, the sample changes for the primary, but not the secondary tablets. The Stage 1 Sample will need to be re-synchronized between the primary and secondary tablets if those new residents are part of the stage 2 survey.

#### Check a Resident is Available on a Secondary Tablet

If a resident assigned to a secondary surveyor is not showing on their Stage 2 Survey tree, the first step is to determine if the resident is available on the secondary tablet.

1. Click Options | Select Stage 2 Residents.
2. Click the Last Name column header to sort by last name.
3. Check for the resident in the list. If the resident is not in the list, then the secondary tablet needs the Stage 1 sample from the primary tablet.

#### Re-sync the Stage 1 Sample

If the resident is not on the secondary tablet, re-synchronize the Stage 1 sample.

1. Press F5 to refresh the screen (it is easy when moving back in the workflow menu to get the incorrect sync screen).
2. Check that the primary and secondary tablets are both on the Onsite Prep menu -> Stage 1 Sample sync screen.

## QIS Checklist

3. Re-sync the Stage 1 sample.
4. After re-syncing, check the Stage 2 assignment for the resident on the secondary tablet.

### **Resident Re-assigned To Another Surveyor Still In My Assignments**

If the primary surveyor changes assignments via the Stage 2 Assignment screen and re-synchronizes the Stage 2 Sample, secondary surveyors will receive new assignments. Old assignments remain in the original surveyor's Stage 2 Survey. Synchronization of the Stage 2 Sample will never delete assignments.

When this occurs:

- The survey team will need to communicate to learn which surveyor is responsible for the assignment.
- The surveyor who is no longer responsible for the assignment should NOT remove the resident / care area. Since the resident / care area is not removed, they will not receive a check mark for their Stage 2 tasks. When the Stage 2 data is synchronized back to the primary tablet, the task remains un-checked only if the new surveyor forgets to cover the assignment.
- The surveyor who is now responsible for the assignment must complete the task in order for the primary to receive a checkmark. The checkmark is received once all data is synchronized back to the primary tablet.

### **Correct Procedure to Make Stage 2 Workload Adjustments**

To make Stage 2 workload adjustments, the team should not make re-assignments via the Stage 2 Assignment screen.

To make Stage 2 workload adjustments, the surveyor who is no longer responsible for the assignment should NOT remove the resident / care area. Since it is not removed, they will not receive a check mark for their Stage 2 tasks. The surveyor assuming responsibility of the assignment should initiate the resident / care area and complete the investigation. When the Stage 2 data is synchronized to the primary, the task will remain un-checked if the new surveyor forgets to cover the assignment.

## **Saving ASE-Q Reports Electronically**

The team coordinator or a surveyor may choose to save the ASE-Q reports to a file outside of ASE-Q. To save reports electronically:

1. Open the desired report from the list under **Reports**
2. On the report window, click on the **Export Report** icon on the top tool bar
3. Use the **Save in** drop list to navigate to a facility folder on the flash drive or desktop.
4. Enter a **File name** according to your state's procedures.
5. Change the **Save as type** drop list to the preferred type (i.e. \*.doc, \*.pdf, or \*.rtf).
6. Select **Save**.

## QIS Checklist

7. Close using the Red X in the top right corner of the report window.

### Select Stage 2 Resident

Care Areas or F Tags: To include a resident for care areas or F Tags that did not trigger, follow the instructions at **Initiating Care Area/F Tags**.

Facility Tasks: To include a resident ID for potential citation documentation for a facility task CE:

1. Click on **Select Stage 2 Residents** under **Options** on the menu bar.
2. Click on the 'Last Name' column to alphabetize the names in the Resident Pool.
3. Find the applicable resident and ID in the drop-down menu.
4. Click on the checkbox in the **On Report?** column (if not already checked) to include the resident in the Stage 2 reports. Click **OK**.
5. Type the Resident ID into the facility task CE documentation.

**Adding a Resident to the Pool**: If a resident that needs to be included in the Stage 2 Sample is not in the Resident Pool, complete the following steps on the primary laptop:

- A) On the Navigator menu, expand Onsite Preparation and Resident Reconciliation.
- B) Select **Add/Update Residents** button.
- C) **Enter the information** for the applicable resident from the New Admission Information form and select **Close**. If the resident was admitted since the New Admission Information form was completed, obtain the information from the facility.
- D) Complete Step 15, Sync Stage 1 Samples and Workload, for the secondary laptops that need the added resident.

### Surveyor Assignments

**Assign**: Select an item in the left pane; select an item in the right pane. Click on the **Assign** button.

**Note**: The **Assign** button is enabled when items are selected in both the left and right panes.

**Unassign**: Select an item in the right pane; select an item in the left pane. Click on the **Unassign** button.

**Note**: The **Unassign** button is enabled when an item is selected in the right pane.

**Note**: More than one item in the left or right panes can be selected and moved at one time. Hold down the Control [Ctrl] keyboard button while selecting all of the desired items. Click the **Assign** or **Unassign** button to move the selected items, or Drag-and-Drop them using the left-click and mouse pad.

### Surveyor Notes

Use **Surveyor Notes** (under **Options** on the top menu bar) to document random temporary notes.

**Warning**: Surveyor Notes are not retained with the survey shell.

If random concerns are identified for sampled or non-sampled residents, document those concerns in **Surveyor Notes** and report them to the team. As needed, paste documentation from **Surveyor Notes** to a documentation field for a Care Area, F Tag, or facility task.

**Note**: Refer to **Initiating Care Areas/F Tags/Facility Tasks** above as needed.

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### Synchronization Method

- A. When a CMS Regional Office (RO) surveyor is participating as a QIS team member, synchronization must be done using a wired network cable to connect the Team Coordinator and RO surveyors' laptops.

**Note:** For diagram instructions on how to synchronize using a wired network cable, refer to ASPEN 10.0 QIS IT Training Guide, *Synchronizing with an RO Surveyor Using Wired Network Cable*.

- B. When a CMS Regional Office (RO) surveyor is observing a survey while conducting a Federal Oversight for QIS (FOQIS), survey data is transferred through an ASE to ASE file transfer over a wired network cable, instead of completing the ASE-Q synchronization steps.

**Note:** For diagram instructions on how to complete an ASE to ASE transfer using a wired network cable, refer to ASPEN 10.0 QIS IT Training Guide, *View a QIS Survey as an Observer, Wired Network Method*.

- C. When a certified QIS trainer is observing a survey while conducting a compliance assessment, survey data is transferred through an ASE to ASE file transfer using either a USB or a wired network cable, instead of completing the ASE-Q synchronization steps.

**Note:** For diagram instructions on how to complete an ASE to ASE transfer using a wired network cable, refer to ASPEN 10.0 QIS IT Training Guide, *View a QIS Survey as an Observer*.

### Team Roster

If the Team Roster is created in ACO, it will be distributed to all laptops when the survey shell is imported into ASE. If changes to the survey team occur in the field, changes to the Team Roster must be completed on all laptops.

It is best to update the survey team using the Team Roster in ASE.

To update the **Team Roster** in ASE, right-click on **Event ID** in the tree and select **Team Roster**. Click on the **Update** button on the **Team Roster** window. On the **Select Surveyors** window, uncheck the surveyor(s) who is not on the team and check the replacement surveyor(s).

**Note:** If the team roster changes before Onsite Preparation but after the Mandatory Facility Task Assignments are made during Offsite Preparation, do NOT uncheck a surveyor on the Select Surveyors window. Reassign the task on the Mandatory Facility Task Assignments screen to a replacement surveyor first, and then remove the surveyor from the Team Roster. Complete step 8, Sync Offsite Prep Info and Assignments, with the replacement surveyor.

**Note:** If a surveyor needs to leave the survey before it is completed, the surveyor must backup all data to the team coordinator's flash drive according to step 24 or step 41 depending on the timing of the surveyor's departure.

If the replacement surveyor is not listed on the **Select Surveyors** window, contact the State ASPEN coordinator to obtain the surveyor's information. Once that information is obtained, select the **New** button and enter it in the fields on the **Enter New Staff Information** window. Select **OK**.

If the team coordinator is not designated with a blue icon on the **Team Roster**, highlight the surveyor who is designated as the team coordinator and select the **Leader** button.

## QIS Checklist

### Word Processing Functions

All of the documentation fields throughout the ASE-Q screens have basic word processing functions (i.e., spell check, copy, and paste). Right-click in the documentation field to:

- Select the desired functions from the right-click menu, or
- Select **Full Screen Display** at the bottom of the right-click menu. The documentation field appears in a larger separate window with toolbar buttons at the top.

Copy and paste may also be done using **Ctrl+C** for copy and **Ctrl+V** for paste.