

Instructions if you Encounter Software or Hardware Issues During a LTCSP

If you encounter software (*i.e., ASE-Q or the LTCSP application*) and/or hardware (i.e., your computer) issues at any point during the survey process, you can complete the survey using the steps described below. The approach described in this document is a last resort. We recommend that teams have a back-up computer, if possible, with the latest version of ASE-Q installed in case significant software or hardware issues arise. Additionally, the team should make every effort to resolve the issues. If the issues cannot be resolved on your own, contact your State Agency (SA) IT staff (for hardware or software issues) and/or the QTSO Help Desk at 1-888-477-7876 (for software issues). In the event that the above efforts do not work and you are unable to access the survey software or use your computer, follow these instructions to complete the survey using electronic or hard copies of all forms. **You should still refer to the LTCSP Procedure Guide (either a hard copy or electronic) for survey process instructions.** If a surveyor's computer breaks, using an electronic LTCSP Procedure Guide may not be possible, so be sure to have a hard copy available.

I. OFFSITE PREP

- **Have available Electronic or Hard Copy Forms**
 - o Each team member should have an electronic version of every form to use if software issues are encountered and have a hard copy of every form to use if hardware issues are encountered. These forms are included in the Survey Resources folder found on the website at <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes.html> and should be saved to a folder on your desktop:
 - LTCSP Procedure Guide (which includes the Sample Size, Recommended Team Size, *Initial Pool Size, and Complaint/FRI Size* Grid, and Complaint and FRI Policy)
 - Offsite Prep form
 - Entrance Conference worksheet
 - Blank Matrices with Instructions (*CMS-802*)
 - Resident Interview Care Areas and Probes
 - Resident Representative Interview Care Areas and Probes
 - Resident Observation Care Areas and Probes

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- Record Review Care Areas and Probes
- Mapping Document
- All Critical Element (CE) and Facility Task Pathways
- Surveyor Notes Worksheets
- Appendix PP
- Chapter 7
- Appendix Q
- *Immediate Jeopardy Template*
- Psychosocial Outcome Severity Guide
- List of Revised F tags/Substandard Quality of Care F tags
- Principles of Documentation
- *FAQ on Resumption of LSC, EP and LTC Health Surveys*
- **If there is no MDS data with the shell:**
 - o During the transfer, if no residents are included in the shell, you will receive a warning indicating there is no available MDS assessment data. It is recommended that the SA's MDS/RAI Coordinator resolve the issue if possible (e.g., address submission concerns with the facility) and reschedule the survey once the issue has been resolved since it is critical to have MDS data for the survey wherever possible.
 - o If you decide to continue with the survey when you do not have any MDS data with the shell, you will not have any offsite selected residents, closed record residents, or MDS indicator information available. The initial pool and sample will be comprised of just onsite selected residents. The team will need to complete an initial screening of all residents in the facility, identify a subset for the initial pool (vulnerable, new admissions, complaints, FRIs, and other resident who has significant concerns), and conduct the interview, observation, and record review for all initial pool residents.
- **If the TC is unable to import the survey shell:**
 - o **IMPORTANT:** Any time the TC encounters software or hardware issues, consider whether you want to change the TC designation to a surveyor who has access to his/her software and hardware. As long as the TC has access to the software, the team can benefit from the software's functionality by: 1) allowing team members with functional software to share data; and 2) consolidating the team's findings to increase their effectiveness for meetings, sample selection, and potential citations.
 - o If the TC is unable to import the survey shell, complete steps 6 through 8 on

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the Offsite Prep form (electronic or hard copy) which is in the Survey Resources electronic folder saved to your desktop. In addition to completing the Offsite Prep form, ensure unit assignments are noted on the form.

- o If a team member (or staff in the office) is able to import the shell in ASE-Q, the team member should create and send to the TC an electronic or hard copy version listing the offsite selected residents, facility rates, outstanding complaint/FRI information, and residents selected for a closed record review. To create the reports, in the LTCSP tool:
 - Offsite Selected Residents and Facility Rates: Click on the Reports icon – the clipboard without a pencil - on the far-right side of the screen. Check the box in front of Facility Rate Report and Offsite Selected Residents report, then click the Run Reports button at the bottom of the page.
 - Closed Record Reviews: Go to the Navigation menu, click on *Select Sample/Assignment | Finalize Closed Record Sample* and document the list of residents selected for the closed record review.
 - Outstanding complaint/FRI information: Go to Navigation menu, click on Offsite Prep screen to identify the list of active complaints/*FRI*s OR review the information in ACTS. Follow your state’s practice for identifying any potential outstanding *complaints*/FRI.s.
- o The TC should then send the Offsite Preparation form to each surveyor through a secure method (e.g., secured email or encrypted flash drives), along with the offsite selected residents, facility rates, outstanding complaint/FRI information and residents selected for a closed record review.
- **If a team member is unable to import the survey shell:**
 - o If a team member is unable to import the shell, the TC will have to provide the offsite prep information, unit assignments and reports (e.g., offsite selected residents) to the surveyor. The surveyor will have to use electronic or hard copies of the survey forms to complete the survey which are in the Survey Resources electronic folder saved to your desktop.
 - o If any surveyor is unable to import the shell, assign a section of numbers to that surveyor(s) to use as a resident identifier for their residents. For example, Surveyor A might use 400’s and Surveyor B might use 500’s to uniquely identify their initial pool residents. The software assigns resident

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IDs starting with number one. If a surveyor gains access to the software, the surveyor should revert to the resident ID in the system.

II. FACILITY ENTRANCE

- **If the TC has software or hardware issues:**
 - Complete the Entrance Conference using the worksheet (electronic or hard copy), documenting all information on the worksheet.
 - If you were unable to get a list of residents selected for a closed record review (e.g., no MDS data or the entire team was unable to import the survey shell), ask the facility for a list of discharged residents in the last 90 days with an indication of the discharge location *and whether the discharge to a location other than the hospital was either unplanned (facility-initiated) or planned (resident-initiated)*.
 - Ensure you have the offsite selected residents report and complaint/FRI information for any complaint/FRI resident assigned to you when you go to your assigned area.
- **If other team members have software or hardware issues:**
 - Ensure *team member(s)* have the offsite selected residents report and complaint/FRI information for any complaint/FRI resident assigned to *them when going to their* assigned area.
- **If the entire team has software issues:**
 - If the entire survey team is unable to use the software, all team members will complete the survey using electronic or paper versions of all forms and will follow the steps outlined below regarding documenting and sharing of information.
- **Attach forms to the survey**
 - As long as one team member has access to the software, he/she can attach your completed electronic or scanned hard copy versions of forms to the survey. Click on the paperclip icon on the far-right side of any screen and follow the instructions on the screen to attach your forms.

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III. INITIAL POOL PROCESS

- **If the TC has software or hardware issues:**
 - **IMPORTANT:** Again, if the TC encounters issues at any point during the survey, the team should consider changing the TC designation so data can still be shared among the team members who aren't experiencing software/hardware issues.
- **If any team member has software and/or hardware issues:**
 - If you are just experiencing software issues, complete the initial pool process using electronic versions of all forms (RI, RRI, RO and RR).
 - If you are unable to use your computer, you will complete the initial pool process using hard copies of all forms.
 - On a surveyor notes (CMS-807) worksheet (electronic or hard copy) or on a RI/RRI/RO/RR form (electronic or hard copy), document the resident's name and ID number (TC will have to assign a section of numbers to you), room number, and applicable subgroups once you include the resident in the initial pool. Document the interview status, your concerns for each resident (i.e., care area, source, and details for any concern), and any MDS accuracy concerns (i.e., care area, detail, and whether the care area requires further investigation).
 - If an offsite selected resident is no longer in your assigned area, document the discharge location (or moved to a different unit) on your surveyor notes worksheet, *including whether a discharge to a location other than the hospital was unplanned (facility-initiated) or planned (resident-initiated)*.
 - If you completed some initial pool information prior to having software/hardware issues and are unable to retrieve the data (*verify that the TC does not have the information*), you will have to document the information (if you can recall it) on a surveyor notes worksheet or initial pool form. If you are unable to recall the information, you will have to follow up with the resident again.
 - If you are unable to access the Dining pathway in the software, use an electronic or hard copy of the pathway to guide your investigation and document your concerns. If your computer isn't functioning, use a hard copy of the facility task pathway. Remember that Dining, Infection Control, and Sufficient Staffing are shared tasks. One team member is responsible for completing the task but all team members are assigned these tasks.

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- o You will have to verbally provide your information to the team during meetings (e.g., residents and concerns from the initial pool or potential citations). While the TC is responsible for taking notes, each team member needs to be aware of each team member's concerns.
- o If you are unable to access the Team Meeting screen in the software, refer to the team meeting questions/probes in the LTCSP Procedure Guide and document the information on a surveyor notes worksheet (electronic or hard copy).
- **Attach forms to the survey**
 - o As long as one team member has access to the software, he/she can attach your completed electronic or scanned hard copy versions of forms to the survey. Click on the paperclip icon on the far-right side of any screen and follow the instructions on the screen to attach your forms.

IV. SAMPLE SELECTION

- **If the TC has software issues:**
 - o If the TC is unable to access the *Finalize Closed Record Sample or Finalize Sample screens* in the software, the team should consider changing the TC designation.
 - o It is highly recommended that the team use the software for sampling as long as the TC has access to the *finalize closed record sample and finalize sample screens*. However, if there are a number of surveyors having software issues and the team strongly believes entering the information into the software is negatively impacting time, the team may use electronic or hard copy versions of the forms to complete the survey.
 - o If the team does not change the TC designation (or none of the surveyors are able to access the software), the team should document the sample, applicable investigative areas, and surveyor assignments on the "Sample Selection Tool to Address Software or Hardware Issues" table, which is appended to this document.
 - o The TC will complete the following steps on the Sample Selection Tool:
 - *Complete the closed record review selection following the guidance in the LTCSP Procedure Guide. If you had to request a list of discharged residents, select a resident who had an unexpected death (i.e., not on hospice, did not have a terminal prognosis), was hospitalized and did not return, and had an unplanned (facility-initiated) discharged to a location other than*

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the hospital. If none, select a planned (resident-initiated) discharge.

- Document the census number and the required sample size (refer to *Attachment A, Sample Size, Recommended Team Size, Initial Pool Size, and Complaint/FRI Size* in the LTCSP Procedure Guide).
 - Follow the LTCSP Procedure Guide instructions for selecting the sample. Each team member will need to review their initial pool forms to identify potential candidates for the sample.
 - In the first column (# of FI), document the total number of residents who had further investigation marked for that area so you can quickly determine whether you have selected a resident to cover every area and covered each area adequately.
 - Once a sample resident is identified, across the top columns of the Tool, document the resident's name, resident ID, and room number.
 - For each sampled resident, place a checkmark next to each care area that *is included for an* investigation.
 - Ensure your number of sampled residents equals (at a minimum) the required sample size number. Reference the LTCSP Procedure Guide for the sample size.
 - Select five residents for an unnecessary medication review (prioritize those residents who had medication or adverse consequence concerns and ensure you include a resident who is receiving an antipsychotic and has a diagnosis of Alzheimer's/dementia, a resident who is on an anticoagulant, a resident who receives insulin, *and a resident 65+ years with a new diagnosis of schizophrenia with an antipsychotic*, if available).
 - Discuss each triggered facility task (environment, personal funds, resident assessments, and *binding arbitration agreement*) and whether the task requires an investigation and the reason behind the investigation.
 - Enter the initials for the assigned surveyor in the space provided for sampled residents, including closed records, unnecessary medications, and triggered facility tasks.
- **If any team member has software or hardware issues:**
 - o If a team member cannot share their initial pool data, the TC will have to add that surveyor's sample residents and investigative areas on the Finalize

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Sample screen.

- o The surveyor will have to keep track of which of their residents were selected for the sample (e.g., on the Sample Selection Tool appended to this document or surveyor notes) and which care areas need to be investigated.
- o If any resident does not have a system generated resident ID, ensure resident IDs are discussed during the team meeting so each resident has a unique resident ID number.
- **Attach forms to the survey**
 - o As long as one team member has access to the software, he/she can attach your completed electronic or scanned hard copy versions of forms to the survey. Click on the paperclip icon on the far-right side and follow the instructions on the screen to attach the sample selection tool.

V. INVESTIGATION

- **If any team member has software or hardware issues:**
 - o If you are unable to access the Investigation screen in the software, use an electronic or hard copy version of the pathways to guide your investigation, document your investigative notes, and compliance and severity decisions on a surveyor notes worksheet or on the pathway. Use the LTCSP mapping document which is in the Survey Resources folder to identify which care areas have a pathway and which do not.
 - o For care areas without a pathway, refer to the LTCSP mapping document for guidance regarding which tags to investigate and cite to ensure consistency.
 - o If you started to have software/computer issues after the sample meeting, the TC can provide you a report of your initial pool areas marked for further investigation along with your notes to assist with your in-depth investigation.
- **Attach forms to the survey**
 - o As long as one team member has access to the software, he/she can attach your completed electronic or scanned hard copy versions of forms to the survey. Click on the paperclip icon on the far-right side and follow the instructions on the screen to attach your forms.

VI. ONGOING AND OTHER SURVEY ACTIVITIES

- **If any team member has software or hardware issues for closed record**

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reviews:

- o If you are unable to access the Investigation screen in the software, use an electronic or hard copy version of the pathway to guide your investigation of the closed record reviews and document your concerns, and compliance and severity decisions on a surveyor notes worksheet or on the pathway.
- o If closed record review assignments weren't made during the sample selection meeting, ensure the team is aware of which surveyor is completing the closed record review for which area (i.e., death, hospitalization, or *unplanned [facility-initiated]* discharge) to avoid duplicative efforts.
- **If any team member has software or hardware issues during facility task investigations:**
 - o If you are unable to access the Facility Task screen in the software, make sure you are aware of the mandatory and triggered facility tasks assigned to you.
 - o For triggered facility tasks, make sure you are aware of the specific concerns for any resident who wasn't assigned to you during the initial pool (e.g., another surveyor's resident who had a call *device* not functioning).
 - o Use an electronic or hard copy version of the facility task pathways to guide your investigation for mandatory and triggered facility tasks and document your investigative notes on a surveyor notes worksheet or on the pathway.
 - o The TC should ensure all facility task assignments are completed.
- **Attach forms to the survey**
 - o As long as one team member has access to the software, he/she can attach your completed electronic or scanned hard copy versions of forms to the survey. Click on the paperclip icon on the far-right side and follow the instructions on the screen to attach your forms.

VII. POTENTIAL CITATIONS

- **If the TC has software issues:**
 - o **IMPORTANT:** If the TC is unable to access the Potential Citation screen, the team should consider changing the TC designation.
 - o It is highly recommended that the team use the software for potential citations as long as the TC has access to the screen. However, if there are a number of surveyors having software issues and the team strongly believes

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entering the information into the software is negatively impacting time, the team may document final citation decisions on a surveyor notes worksheet.

- o If the TC designation is not changed, document all final citations (including resident name, ID, and scope and severity) on a surveyor notes worksheet.
- o Document the tags that are not being cited and provide the rationale for not citing them.
- o Cited tags will have to be added in ASE-Q or ACO (depending on your state practice).
- o The TC will also have to create a sample list to provide to the facility.
- **If any team member has software or hardware issues:**
 - o If a team member is unable to share their investigation data with the TC, the TC should make a note of that surveyor's final citations (including resident name, ID, scope and severity, surveyor name and ID). Each team member should have detailed investigative notes to assist the team with compliance decisions.
 - o Those surveyors' tags will have to be added in ASE-Q or ACO (depending on your state practice).
 - o Follow your SA policy for retaining hardcopy survey documentation. Surveyors can attach electronic or scanned hard copy versions of documents to the survey.
- **Notify CMS:**
 - o If you used this process, notify CMS by email at NHSurveyDevelopment@cms.hhs.gov. Include a description of the software or hardware issue that was encountered, the number of surveyors on the team who experienced the issue, and a brief description of your experience using these instructions.

Sample Selection Tool to Address Software or Hardware Issues

Use this sample selection tool if the team coordinator (TC) is unable to access the *finalize closed record sample or finalize* sample screens during the survey (and you opted not to change the TC designation to another surveyor) or the entire team is unable to access the software.

Complete the following steps:

1. Document the facility census number and the required sample size in the space provided. If the sample size is more than 23 residents, you will need two copies of the sample grid below.
2. *Select residents for closed record review.*
3. Follow the LTCSP Procedure Guide instructions for selecting the sample, *including selecting residents for the unnecessary medication review and determining if the triggered facility tasks require investigation.*
4. Document the total number of residents who had further investigation (FI) marked for that area in the first column (# of FI).
5. When you select a resident for the sample, document the resident's name, resident ID, and room number across the top columns.
6. For each sampled resident, place a checkmark next to each care area that requires further investigation.
7. Ensure your number of sampled residents equals (at a minimum) the required sample size number.
8. Enter the initials for the assigned surveyor in the space provided for sampled residents, including closed records, unnecessary medications, and triggered facility tasks.

Sample Residents																								
Facility Name: _____ Facility ID: _____ Administrator: _____ Census #: _____ Required Sample Size: _____																								
Sample Number	# of FI	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Room Number																								
Assigned Surveyor																								
Abuse																								
Accidents																								
Activities																								
Activities of Daily Living																								
Advance Directives (CPR)																								
<i>Arbitration</i>																								

Sample Selection Tool to Address Software or Hardware Issues

Sample Residents																								
Facility Name: _____ Facility ID: _____ Administrator: _____ Census #: _____ Required Sample Size: _____																								
Sample Number	# of FI	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Room Number																								
Assigned Surveyor																								
Behavioral-Emotional Status																								
Bladder and Bowel																								
Change of Condition																								
Choices																								
Communication and Sensory																								
Constipation																								
Dementia Care																								
Dental Status																								
Dialysis																								
Dignity																								
<i>Discharge</i>																								
Edema																								
<i>Environment</i>																								
Food																								

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Sample Residents																								
Facility Name: _____ Facility ID: _____ Administrator: _____ Census #: _____ Required Sample Size: _____																								
Sample Number	# of FI	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Room Number																								
Assigned Surveyor																								
Hospice and End of Life Services																								
Hospitalization																								
Hydration																								
<i>Infection Control (TBP, Infections [not UTI, pressure ulcers, or respiratory])</i>																								
Neglect																								
Nutrition																								
Pain																								
PASARR																								
Participation in Care Planning																								
<i>Personal Funds</i>																								
Personal Property																								
Physical Restraints																								
Positioning, Mobility, and ROM																								
Pressure Ulcer/Injury																								

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Sample Residents																								
Facility Name: _____ Facility ID: _____ Administrator: _____ Census #: _____ Required Sample Size: _____																								
Sample Number	# of FI	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Room Number																								
Assigned Surveyor																								
Privacy																								
Rehabilitative and Restorative																								
<i>Resident Assessment</i>																								
Respiratory Care																								
Skin Conditions (no-pressure related)																								
<i>Sufficient Staffing</i>																								
Tube Feeding																								
<i>Unnecessary Medication Use</i>																								
Urinary Catheter or UTI																								

Sample Selection Tool to Address Software or Hardware Issues

Identify one resident, if available, for each closed record review area (death, *unplanned (facility-initiated)* discharge and hospitalization). Record the names of the selected residents across the top of the table. Note the assigned surveyor for all of these survey activities.

Closed Records																							
Resident names (list vertically)																							
Assigned Surveyor																							
<i>Closed Record Review</i>																							
Death (unexpected death, not on hospice or has terminal prognosis)																							
Unplanned (facility-initiated), if none, then planned (resident-initiated) discharge (any location except the hospital)																							
Hospitalization (did not return)																							