**Extended Survey:** The purpose of the extended survey is to explore the extent to which structure and process factors may have contributed to systemic problems causing SQC. An extended survey includes all of the following:

* Review of a larger sample of resident assessments than the samples used in a standard survey;
* Review of the staffing and in-service training;
* If appropriate, examination of the contracts with consultants;
* A review of the policies and procedures related to the requirements for which deficiencies exist; and
* Investigation of any Requirement for Participation (RfP) at the discretion of the Survey Agency.

An extended survey is conducted when Substandard Quality of Care (SQC) has been verified.

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

|  |  |  |
| --- | --- | --- |
| **§ 483.10 Resident Rights** | **§ 483.25 Quality of Care** | **§ 483.40 Behavioral Health Services** |
| F550 – Resident Rights/Exercise of Rights | F684 – Quality of Care | F742 – Treatment/Svc for Mental/Psychosocial Concerns |
| F558 – Reasonable Accommodation of Needs/Preferences | F685 – Treatment/Devices to Maintain Hearing/Vision | F743 – No Pattern of Behavioral Difficulties Unless Unavoidable |
| F559 – Choose/Be Notified of Room/Roommate Change | F686 – Treatment/Services to Prevent/Heal Pressure Ulcers | F744 – Treatment/Service for Dementia |
| F561 – Self Determination | F687 – Foot Care | F745 – Provision of Medically Related Social Services |
| F565 – Resident/Family Group and Response | F688 – Increase/Prevent Decrease in ROM/Mobility | **§ 483.45 Pharmacy Services** |
| F584 – Safe/Clean/Comfortable/Homelike Environment | F689 - Free of Accident Hazards/Supervision/Devices | F757 – Drug Regimen is Free From Unnecessary Drugs |
| **§ 483.12 Freedom from Abuse, Neglect, and Exploitation** | F690 – Bowel/Bladder Incontinence, Catheter, UTI | F758 – Free From Unnecessary Psychotropic Meds/PRN Use |
| F600 – Free from Abuse and Neglect | F691 – Colostomy, Urostomy, or Ileostomy Care | F759 – Free of Medication Error Rates of 5% or More |
| F602 – Free from Misappropriation/Exploitation | F692 – Nutrition/Hydration Status Maintenance | F760 – Residents are Free of Significant Med Errors |
| F603 – Free from Involuntary Seclusion | F693 – Tube Feeding Management/Restore Eating Skills | **§ 483.70 Administration** |
| F604 – Right to be Free from Physical Restraints | F694 – Parenteral/IV Fluids | F850 – Qualification of Social Worker >120 Beds |
| F605 – Right to be Free from Chemical Restraints | F695- Respiratory/Tracheostomy Care and Suctioning | **§ 483.80 Infection Control** |
| F606 – Not Employ/Engage Staff with Adverse Actions | F696 – Prostheses | F883 – Influenza and Pneumococcal Immunizations |
| F607 – Develop/Implement Abuse/Neglect, etc. Policies | F697 – Pain Management |  |
| F609 – Reporting of Alleged Violations | F698 – Dialysis |  |
| F610 – Investigate/Prevent/Correct Alleged Violation | F699 – Trauma Informed Care |  |
| **§ 483.24 Quality of Life** | F700 - Bedrails |  |
| F675 – Quality of Life |  |  |
| F676 – Activities of Daily Living (ADLs)/Maintain Abilities |  |  |
| F677 – ADL Care Provided for Dependent Residents |  |  |
| F678 – Cardio-Pulmonary Resuscitation (CPR) |  |  |
| F679 – Activities Meet Interest/Needs of Each Resident |  |  |
| F680 – Qualifications of Activity Professional |  |  |

**Timing:**

The extended survey can be conducted:

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

**Procedures:**

Review facility policies and procedures which are related to the deficiencies representing SQC in an effort to identify systemic failures which may have contributed to the SQC.

**§483.35 Nursing Services:** Was the Sufficient and Competent Nurse Staffing Review Facility Task completed for the standard/abbreviated survey in which SQC was found?

Yes – Review findings from this task to determine if there were any structure or process concerns related to written policies/procedures, or sufficient or competent staff which may have contributed to the SQC.

No – Conduct the Sufficient and Competent Nurse Staffing Review Facility Task with a focus on identifying structure or process concerns which may have contributed to the SQC identified on the survey.

**§483.75 Quality Assurance & Performance Improvement:** Was the Quality Assessment and Assurance (QAA) and Quality Assurance and Performance Improvement (QAPI) Plan Review Facility Task completed for the standard/abbreviated survey in which SQC was found?

Yes – Review findings from this task to determine if there were any structure or process concerns related to the QAPI plan, or QAA committee improvement activities which may have contributed to the SQC.

No – Conduct the QAA/QAPI Plan Review Facility Task with a focus on identifying structure or process concerns which may have contributed to the SQC identified on the survey.

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

§483.30 Physician Services:

1. **Is the facility in compliance with Resident’s Care Supervised by a Physician?**  **Yes  No, F710**

1. **Is the facility in compliance with Physician Visits – Review Care/Notes/Order?**  **Yes  No, F711**
2. **Is the facility in compliance with Frequency of Physician Visits – Frequency/Timeliness/Alternate NPPs?**

**Yes  No, F712**

1. **Is the facility in compliance with Physician for Emergency Care, Available 24 Hours?**  **Yes  No, F713**
2. **Is the facility in compliance with Physician Delegation of Tasks to NPP?**  **Yes  No, F714**
3. **Is the facility in compliance with Physician Delegation to Dietitian/Therapist?**  **Yes  No, F715**

§483.70 Administration *and §483.71 Facility Assessment*

1. Is the facility in compliance with Effective Administration?  Yes  No, F835
2. **If a local, state, or other federal authority has taken a final adverse action against the facility or licensed professional currently providing services in the facility, the facility is not in compliance with F836. Is the facility in compliance with F836?  Yes  No, F836**
3. Is the facility in compliance with Governing Body?  Yes  No, F837
4. *§483.71 Facility Assessment* Is the facility in compliance with the Facility Assessment?  Yes  No, F838
5. Is the facility in compliance with Staff Qualifications?  Yes  No, F839
6. Is the facility in compliance with Use of Outside Resources?  Yes  No, F840
7. Is the facility in compliance with Responsibilities of Medical Director?  Yes  No, F841
8. Is the facility in compliance with Resident Records – Identifiable Information?  Yes  No, F842
9. Is the facility in compliance with Transfer Agreement?  Yes  No, F843
10. Is the facility in compliance with Disclosure of Ownership Requirements?  Yes  No, F844
11. In the event of a pending or potential facility closure, is the facility in compliance with Facility

Closure-Administrator?  Yes  No, F845  N/A

1. In the event of a pending or potential facility closure, is the facility in compliance with Facility Closure?

Yes  No, F846  N/A

1. Is the facility in compliance with Hospice Services?  Yes  No, F849
2. Is the facility in compliance with Qualified Social Worker > 120 Beds?  Yes  No, F850  N/A

§483.95 Training Requirements:

1. Is the facility in compliance with an effective training program for all new and existing staff based on the facility assessment?  Yes  No, F940
2. Is the facility in compliance with providing mandatory effective communications training for direct care staff?

Yes  No, F941

1. Is the facility in compliance with ensuring all staff members are educated on the rights of the resident and the responsibilities of a facility?  Yes  No, F942
2. Is the facility in compliance with Abuse, Neglect, and Exploitation Training?  Yes  No, F943
3. Is the facility in compliance with QAPI training?  Yes  No, F944
4. Is the facility in compliance with providing mandatory training that included written standards, policies and procedures for their infection control program?  Yes  No, F945
5. Does the facility effectively communicate standards, policies and procedures of its Compliance and Ethics program to its entire staff?  Yes  No, F946
6. Is the facility in compliance with Required In-Service Training for Nurse Aides?  Yes  No, F947
7. Is the facility in compliance with Training for Feeding Assistants?  Yes  No, F948  N/A
8. Did the facility develop, implement, and maintain an effective training program for all new and existing staff that includes training to meet the resident’s behavioral health care needs, as described at §483.95(i)?  Yes  No, F949