

SUGGESTED ITEMS FOR SURVEY READY BOOK

Below is a list of suggested items to include in your survey ready book. Your survey ready book should be updated every Monday. The first twenty-five items listed below are required items requested when the State Survey Agency visits your nursing home for survey. The remaining items are optional items to include in your survey ready book that may assist you in your survey process. On an ongoing basis, you should ask your residents questions from the Resident Survey that is used by Surveyors when visiting with residents.

1. Roster/Sample Matrix, include all residents on bed hold.
A. List of interviewable residents.
2. Copy of the actual working schedules for licensed and registered nursing staff for the current pay period. This is due by the end of the tour (or earlier if possible).
3. Facility policies and procedures to prohibit and investigate allegations of abuse and the name of a person that can answer questions about what the facility does to prevent abuse.
4. List of key facility personnel and their locations.
5. A copy of the written information that is provided to a resident regarding his/her rights.
6. A copy of the facility's admission contract(s) for all residents (Medicare, Medicaid and other payment sources).
7. List of admissions during the past month and a list of residents transferred or discharged during the past three months and where they were discharged (e.g., home, hospital, another facility).
8. A copy of the facility's layout, indicating the location of nurses' stations, individual resident rooms, and common areas.
9. The current resident activity schedule/calendar.
10. Meal times, dining locations, copies of all menus, including therapeutic menus that will be served for the duration of the survey.
11. Medication pass times (by unit, if variable).
12. A list of the residents who have elected the hospice benefit and are currently receiving hospice care from an outside agency.
13. A list of residents who receive dialysis services.
14. Names of any residents age 55 and under.
15. A list of resident council officers (include room numbers).
16. Names of any residents who communicate with non-oral communication devices, sign language, or who speak a language other than the dominant language of the facility.
17. Evidence that the facility, on a routine basis, monitors accidents and other incidents, records these in the clinical or other record; and has in place a system to prevent and/or minimize further accidents and incidents.
18. Completed "Long Term Care Facility Application for Medicare and Medicaid" (HCFA-671).
19. Completed "Resident Census and Conditions of Residents" (HCFA-672).