

New Mexico DOH / DHI / QMB: CCS / CIES Delivery Site - Individual Record Review Survey Tool

Standard of Care (TAG)	Surveyor Notes	MET	NOT MET	NA
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Agency/Region: _____

Surveyor: _____ **Date/Time** _____

Individual Name and Identifier: _____

CCS – CIES Service Delivery Site (For provider owned and operated onsite service delivery only. DSP do not need to carry these to off-site locations per 2018 Client File Matrix, unless otherwise noted)

• **2018 Community Inclusion:** Customized Community Supports – Community Integrated Employment Services
 Other Services: PT - OT - SLP - BSC - Adult Nursing Services – Other: _____

Surveyor Instruction: Item(s) which are required in THERAP system, must be in Therap and will be accessed via Therap, unless specified to be a printed copy. Other items that are required, may be accessed via the Agency's electronic system or hardcopy file.

Standard of Care Questions	(Tag #) Surveyor Notes / Deficiency Description	MET	NOT MET	NA
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Nursing & Medical

<p>Health Passport</p> <p>Surveyor Instruction: All Primary and Secondary Provider Agencies must use the Health Passport from an e-CHAT in the Therap system This standardized document contains individual, physician and emergency contact information, a complete list of current medical diagnoses, health and safety risk factors, allergies, and information regarding insurance, guardianship, and advance directives. The Health Passport must be reprinted and placed at all service delivery sites each time the e-CHAT is updated for any reason and whenever there is a change to contact information contained in the IDF This would be met if it there is a printed copy, current copy in the file. If there is no printed copy this cannot not met.</p>	<p>Tag #IS14 (CoP) CCS / CIES service delivery site</p>			
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<p>Comprehensive Aspiration Risk Management Plan (CARMP)</p> <p>Date of CARMP: _____</p> <p>Surveyor Instruction: The Primary Provider Agency ensures that a current, intact CARMP and Aspiration MERP are readily available to staff/DSP in all service delivery sites, For this to be met a current CARMP in the file or in Therap, if required by the Individual.</p>	<p>Tag #IS14 (CoP) CCS / CIES service delivery site</p>			
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<p>Health Care Plans (HCP)</p> <p><u>Surveyor Instruction:</u> The Primary Provider Agency nurse (PPN) is required to create HCPs that address all the areas identified as required in the most current e-CHAT summary report which is indicated by "R" in the HCP column. At the nurse's sole discretion, based on prudent nursing practice, HCPs may be combined where clinically appropriate. The nurse should use nursing judgment to determine whether to also include HCPs for any of the areas indicated by "C" on the e-CHAT summary report. The nurse may also create other HCPs that the nurse determines are warranted. For this to be met, there must be current HCPs in place as required by the eCHAT and / or IST section of the ISP.</p>	<p><i>Tag #IS14 (CoP) CCS / CIES service delivery site</i></p> <p><i>Required per IST:</i></p> <p><i>Required per e-CHAT:</i></p>			
<p>Medical Emergency Response Plans (MERP)</p> <p><u>Surveyor Instruction:</u>-The agency nurse is required to develop a Medical Emergency Response Plan (MERP) for all conditions automatically triggered and marked with an "R" in the e-CHAT summary report. MERPs are required for persons who have one or more <u>conditions or illnesses that present a likely potential to become a life-threatening situation</u>. The MERP cannot be combined with or replace the HCP. For this to be met, there must be current MERPs in place as required by the eCHAT and / or IST section of the ISP.</p>	<p><i>Tag #IS14 (CoP) CCS / CIES service delivery site</i></p> <p><i>Required per IST:</i></p> <p><i>Required per e-CHAT:</i></p>			
Progress Notes & Data Tracking				
<p>Community Inclusion (CCS): Progress Notes/Daily Contact Logs:</p> <p><u>Surveyor Instruction:</u> You must review Community Inclusion daily notes for the current month of your visit (1st day of the month to the day prior to your visit). This cannot be met if there is no documentation found for the period reviewed or if documentation found is completed in advance, e.g. you conduct a visit on the 5th of the month, yet documentation has already been completed for the entire month.</p>	<p><i>Tag #1A08.1</i></p> <p><i>List dates if any are not found</i></p>			

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Standard of Care (TAG)	Surveyor Notes	MET	NOT MET	NA
<p>Community Inclusion (CCS): Data Collection/Data Tracking: <i>(i.e. Outcomes / Action Steps Implementation Tracking)</i></p> <p><u>Surveyor Instruction:</u> You are to review data tracking for the current month of your visit to determine if outcomes / action steps are being completed as called for in the ISP. This includes:</p> <ol style="list-style-type: none"> 1. frequency of outcome and action step being completed as called for in the ISP 2. Presence of outcome / action step data, i.e. documentation; 3. Agency outcomes / action steps match the current ISP; 4. There are outcomes for life area for which the individual receives services funded by the DDW <p><i>This is not met if data tracking is not completed at frequency, not completed, blank document or Outcome / Action Steps do not match current ISP. Surveyors are to determine the frequency at which the outcome is to be completed. You will document from the 1st day of the month to the Friday prior to your visits to determine if they are completed as required frequency (e.g. action step frequency is 1 time weekly, your visit is completed on a Wednesday).</i></p>	<p><i>Tag #1A32.3 CCS / CIES service delivery site</i></p> <p><i>List specific outcome/action plan which is not met and list time frame if any are not found / Must document frequency if not completed as required.</i></p>			
<p>Community Inclusion (CIES): Progress Notes/Daily Contact Logs:</p> <p><u>Surveyor Instruction:</u> You must review Community Inclusion daily notes for the current month of your visit (1st day of the month to the day prior to your visit). This cannot be met if there is no documentation found for the period reviewed or if documentation found is completed in advance, e.g. you conduct a visit on the 5th of the month, yet documentation has already been completed for the entire month.</p>	<p><i>Tag #1A08.1</i></p> <p><i>List dates if any are not found</i></p>			

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I affirm that missing documents requested by the QMB Survey Team were not located in the home or could not be found by myself when asked to produce them during the on-site home visit on:

Date: _____ ***Time:*** _____

DSP Name (Print and Signature) and Title: _____

Surveyor Initials: _____