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Documents Required by DIA for Partial Extended Surveys

1. Staffing schedule with all changes present for 2 weeks. Please include all disciplines that render nursing care/services.
2. Facility policy for physician visits.
3. A list of names and addresses of each resident’s attending physician or medical provider. Please group physicians if they practice together.  Please be sure to exclude podiatrist, dentists, and ophthalmologists.
4. A copy of the facility license and the administrator’s license.
5. The name of the Medical Director.
6. The name of the DON and a copy of their license.
7. A list of all current staff and their disciplines, including management staff.

Once a sample of staff has been chosen, the surveyor will review the employee sample files for:

* physicals completed as required
* TB status requirements
* yearly reviews
* skills testing
* current licenses/certificates,
* criminal/abuse and registry checks
* in-service training offerings completed as required every 12 months

1. Policy regarding the safe guarding of clinical records and retention of closed records.

The CMS form used by surveyors to conduct the Partial Extended Survey can be found at:

<https://www.arhealthcare.com/sites/default/files/2018-03/CMS-20091%20Extended%20Survey.pdf>