



Healthcare Quality Reporting Program

**NURSING HOME SUBCOMMITTEE**

3-4:30pm, 8/20/13

Healthcentric Advisors, 235 Promenade Street, Suite 500, Providence, RI 02908

**Goals/Objectives**

- To advise the Department on nursing home reporting and implement agreed-upon policies

**Invitees**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Rosa Baier, MPH                   | <input type="checkbox"/> Kathleen Nee, RN              | <input type="checkbox"/> Arthur Pullano               |
| <input type="checkbox"/> Lonnie Bisbano                    | <input type="checkbox"/> Maureen Marsella, RN, BS      | <input type="checkbox"/> Adele Renzulli               |
| <input type="checkbox"/> John Gage, MBA, CNHA, CAS, FACHCA | <input type="checkbox"/> Ann Messier                   | <input type="checkbox"/> Janet Robinson, RN, MEd, CIC |
| <input type="checkbox"/> Diane Gallagher                   | <input type="checkbox"/> Jim Nyberg, MPA               | <input type="checkbox"/> Samara Viner-Brown, MS       |
| <input type="checkbox"/> Hugh Hall, MA                     | <input type="checkbox"/> Gail Patry, RN, CPEHR (Chair) |   |

**Time**

**Topic/Notes**

- |        |   |
|--------|---|
| 3:00pm | <p><b>Welcome</b><br/> <i>Rosa Baier, MPH</i><br/> <i>Gail Patry, RN, CPHER</i></p> <ul style="list-style-type: none"> <li>- Today's objectives</li> <li>- Previous meeting's action items:             <ul style="list-style-type: none"> <li>• Update the satisfaction press release (Sam/Rosa) - Completed</li> <li>• Outreach to RIHCA and LeadingAge RI press contacts (Rosa) - Completed</li> <li>• Vet the press release through Communications (Sam) - Completed</li> <li>• Send the nursing home HAI letter to the group (Rosa) - Completed</li> <li>• Research facilities with missing data (Rosa/Maureen) - Completed</li> <li>• Outreach to Ray re: Facilities Regulations process for audit (Rosa/Sam) - Completed</li> <li>• Clarify MIV instructions for 2013 (Maureen/Rosa) - Completed</li> <li>• Implement prospective check of resident and family lists (Ann/MIV) - Pending</li> <li>• Determine whether annual contracts are needed for 2013 (Maureen/Rosa) - Completed</li> </ul> </li> </ul> |
|--------|---|

Time	Topic/Notes
3:05pm	<p data-bbox="358 163 854 195"><b>Resident and Family Satisfaction Surveys</b></p> <p data-bbox="358 201 558 233"><i>Rosa Baier, MPH</i></p> <p data-bbox="358 237 618 268"><i>Gail Patry, RN, CPEHR</i></p> <ul style="list-style-type: none"> <li data-bbox="358 289 841 321">– Timeline and data trends (handouts)</li> <li data-bbox="358 342 667 373">– Follow-up from 2012: <ul style="list-style-type: none"> <li data-bbox="407 394 837 426">• State citation recommendations</li> <li data-bbox="407 430 797 462">• Delinquent payments to MIV</li> </ul> </li> <li data-bbox="358 483 686 514">– Process improvements: <ul style="list-style-type: none"> <li data-bbox="407 535 865 567">• Clarify contract/sign-up procedure</li> <li data-bbox="407 571 1208 602">• Clarify directions to survey both residents AND family members</li> <li data-bbox="407 606 1000 638">• Prospectively validate mailing list submissions</li> </ul> </li> <li data-bbox="358 659 540 690">– Discussion: <ul style="list-style-type: none"> <li data-bbox="407 711 906 743">• Do we want to proceed as scheduled?</li> <li data-bbox="407 747 1040 779">• Are there other changes we want to incorporate?</li> </ul> </li> <li data-bbox="358 800 532 831">– Next steps</li> </ul>
3:45pm	<p data-bbox="358 856 761 888"><b>Consumer-friendly report format</b></p> <p data-bbox="358 894 558 926"><i>Rosa Baier, MPH</i></p> <ul style="list-style-type: none"> <li data-bbox="358 947 987 978">– Update from AHRQ home health reporting grant: <ul style="list-style-type: none"> <li data-bbox="407 999 724 1031">• Consumer preferences</li> <li data-bbox="407 1035 1060 1066">• Discharge providers’ use of information (handouts)</li> <li data-bbox="407 1071 792 1102">• Suggestions for the program</li> </ul> </li> <li data-bbox="358 1123 1055 1155">– Discuss addition of a report with all nursing home data <ul style="list-style-type: none"> <li data-bbox="407 1176 873 1207">• Use of Facilities Regulations’ report</li> <li data-bbox="407 1211 959 1243">• Reinstatement of updated diamond report</li> </ul> </li> </ul>
4:00pm	<p data-bbox="358 1266 769 1297"><b>Healthcare worker flu vaccination</b></p> <p data-bbox="358 1304 558 1335"><i>Rosa Baier, MPH</i></p> <p data-bbox="358 1339 589 1371"><i>Emily Cooper, MPH</i></p> <ul style="list-style-type: none"> <li data-bbox="358 1392 678 1423">– Review data (handout)</li> <li data-bbox="358 1444 889 1476">– Updates to the 2012-2013 report format</li> <li data-bbox="358 1497 586 1528">– Review trends: <ul style="list-style-type: none"> <li data-bbox="407 1549 638 1581">• Response rates</li> <li data-bbox="407 1585 662 1617">• Vaccination rates</li> </ul> </li> </ul>
4:25pm	<p data-bbox="358 1654 675 1686"><b>Open Forum &amp; Next Steps</b></p> <p data-bbox="358 1692 558 1724"><i>Rosa Baier, MPH</i></p> <ul style="list-style-type: none"> <li data-bbox="358 1745 557 1776">– Action items</li> <li data-bbox="358 1797 699 1829">– Next meeting: 10/15/13</li> </ul>



Department of Health

Three Capitol Hill  
Providence, RI 02908-5097

TTY: 711  
[www.health.ri.gov](http://www.health.ri.gov)

August 14, 2013

Dear Nursing Home Administrator,

For the past four years, Rhode Island nursing homes have, on average, outperformed nursing homes nationwide using My InnerView's resident and family satisfaction surveys. **It is now time to begin the 2013 survey process and continue to demonstrate our state's commitment to high-quality nursing home care.** Instructions and deadlines are included below and in the attached timeline from My InnerView.

As a reminder, the annual resident and family satisfaction survey process is legislatively mandated and included in the nursing home regulations. Requirements are as follows:

- New participants: Required to sign a contract with My InnerView, due 9/6/13
- Returning participants: Required to complete a sign-up sheet, due 9/6/13
- All facilities: Provide My InnerView with resident and family mailing lists for:
  - 100% of your long-stay (100+ days) residents' family members, **and**
  - 100% of non-terminal, long-stay (100+ days) residents who can answer the survey alone or with help.

Nursing home contracts (for new participants) and sign-up sheets (for returning participants) will come directly from My InnerView. Please return documents promptly and also note the following important dates:

Due Date	Task
9/6/13	1. <b>New participants:</b> Return a signed contract (new participants) to My InnerView. <b>Returning participants:</b> Return a completed sign-up sheet (returning participants) to My InnerView. Email completed document to Erin Hobelman <a href="mailto:ehobelman@nationalresearch.com">ehobelman@nationalresearch.com</a>
9/13/13	2. Complete or update your facility profile at <a href="http://www.myinnerview.com">www.myinnerview.com</a> . (Please see the attached timeline for detailed instructions)
9/20/13	3. Provide My InnerView with mailing lists for: <ul style="list-style-type: none"><li>• 100% of your long-stay (100+ days) residents' family members, <b>and</b></li><li>• 100% of non-terminal, long-stay (100+ days) residents who can answer the survey alone or with help.</li></ul> (Please see the attached timeline for detailed instructions)

For a copy of My InnerView's screening tool, which will help you identify survey-appropriate residents, or help with any of the above tasks, contact Erin Hobelman at My InnerView: (800) 601-3884 or [ehobelman@nationalresearch.com](mailto:ehobelman@nationalresearch.com).

**Again, participation in the survey process is mandatory and these dates are firm.** HEALTH tracks participation closely. Facilities Regulations follows up with nursing homes regarding state citations, as needed. If you have questions, or would like to participate in the stakeholder group that advises the public reporting program about nursing home reports, please contact Gail Patry, Chair of the Nursing Home Subcommittee: 401-528-3256 or [gpatry@healthcentricadvisors.org](mailto:gpatry@healthcentricadvisors.org).

I wish you the best in your continued quality improvement work, and look forward to seeing your survey results.

Sincerely,

A handwritten signature in cursive script that reads "Samara Viner-Brown".

Samara Viner-Brown, MS  
Chief, Center for Health Data and Analysis  
401-222-5122 or [samara.viner-brown@health.ri.gov](mailto:samara.viner-brown@health.ri.gov)

## 2013 Satisfaction Survey Timeline Schedule for Rhode Island Department of Health

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My InnerView will host the following webinars to review the satisfaction survey timeline and schedule and discuss best practices for a successful survey.

Please participate in one of the following live webinars:

**Thursday, August 29th 9:00-10:00 a.m. CST/ 10:00-11:00 a.m. EST**

**Friday, August 30th 1:00-2:00 p.m. CST/ 2:00-3:00 p.m. EST**

**You will receive an email invitation to both webinar’s. You will only need to register for the time that best fits your schedule. If you are unable to attend you will receive an email with a link to a recording of the webinar for viewing at your convenience. You may also join the day of the call using the instructions below:**

**DAY OF WEBINAR/CONFERENCE CALL**

(Please join early as the webinar will begin promptly)

1. Go to [www.readytalk.com](http://www.readytalk.com) using your Internet Explorer Web browser
2. In the “participant login” field, enter access code **8482700** and click “join”
3. Call 1-866-740-1260 when prompted dial 8482700

**To optimize the value of your survey results, you must take the lead on these critical steps. If you have questions regarding your timeline, please e-mail [help@myinnerview.com](mailto:help@myinnerview.com) or call us at 800-601-3884.**

<b>No later than ...</b>	<b>You should ...</b>	<b>Helpful information</b>
<b>Friday September 6th</b>	<b>Return your completed sign-up sheet or contract to My InnerView</b>	Email completed document to Erin Hobelman <a href="mailto:ehobelman@nationalresearch.com">ehobelman@nationalresearch.com</a> .

## 2013 Satisfaction Survey Timeline Schedule for Rhode Island Department of Health

<b>Friday September 13<sup>th</sup></b>	<p><b>Complete or update your entire facility profile</b></p> <p>Note: for information about ordering foreign language surveys please email <a href="mailto:surveys@myinnerview.com">surveys@myinnerview.com</a>.</p>	<p>Go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>; enter the user name and password provided by My InnerView or your corporate office. On the <b>Home</b> page, click on <b>Organization Editor</b> and review the information to ensure the facility information is accurate. To make a change, click on the <b>Edit</b> button in the lower-right of the screen, and then click on <b>Submit</b> to save changes.</p> <p><b>Important:</b> Capitalize and spell information exactly as it should appear on your surveys. <u>Facility name information printed on the survey is taken from the information you enter.</u></p> <p><u>Include full-time and part-time employees when preparing for employee surveys. Provide an accurate count as this is the number of employee surveys printed.</u></p> <p><i>A separate charge will apply for any additional surveys needed after the original production run has been completed.</i></p> <p><i><u>Do not photocopy surveys for distribution. Photocopied surveys received by My InnerView will not be included in your results.</u></i></p>
<b>Friday, September 20th</b>	<p><b>Submit mailing addresses for residents, family members or other individuals knowledgeable of resident</b></p>	<p>Go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>. Enter your user name/password. On the <b>Home</b> page, click on <b>'eLearning site'</b> link. Click on Satisfaction Survey Resources. Under the Pre-Survey Toolkit scroll down to Screening Residents and Clients. You may use the resident screening tool to determine if residents are capable of completing the survey.</p> <p>Select the Data File Template under <b>'Submitting Customer Addresses'</b>. Review the instructions on how to complete the spreadsheet. Accurate names and complete mailing addresses are critical for residents, family members or other responsible parties. <u>Your survey response rate is directly affected by the accuracy of your mailing list.</u></p> <p style="text-align: center;"><b>E-mail all facilities on <u>one data file</u> as an attachment to <a href="mailto:surveys@myinnerview.com">surveys@myinnerview.com</a>.</b></p> <p><i>A separate charge will apply for any additional surveys needed after the original production run has been completed.</i></p> <p><i><u>Do not photocopy surveys for distribution. Photocopied surveys received by My InnerView will not be included in your results.</u></i></p>
<b>No later than ...</b>	<b>You should ...</b>	<b>Helpful information</b>
<b>Friday, September 20th</b>	<p><b>Submit Logo</b></p> <p><b>Optional</b></p>	<p>We only accept .jpg, .bmp, or .gif as valid image formats. They will need to be submitted in the proper format.</p> <p><b>E-mail the Logo as an attachment to <a href="mailto:surveys@myinnerview.com">surveys@myinnerview.com</a>.</b></p>

## 2013 Satisfaction Survey Timeline Schedule for Rhode Island Department of Health

<b>Friday, October 18th</b>	<b>Mail notification letters to family members or other individuals knowledgeable of the resident</b>	<p>Go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>. Enter your user name/password. On the <b>Home</b> page click on 'eLearning site' link. Click on Satisfaction Survey Resources. Scroll down to Notifying Survey Recipient-Customer.</p> <p><i>Notification of the survey process will encourage your response rates.</i></p>
<b>Friday, October 18th</b>	<b>Distribute notification letters to residents</b>	<p>Go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>. Enter your user name/password. On the <b>Home</b> page click on 'eLearning site' link. Click on Satisfaction Survey Resources. Scroll down to Notifying Survey Recipient-Customer</p> <p><i>Notification of the survey process will encourage your response rates.</i></p>
<b>Wednesday, October 23rd</b>	<b>My InnerView mails resident and family surveys</b>	<p>My InnerView will personalize Resident/Family Satisfaction Surveys with the facility's name (as entered on the Web site.) The established cut-off date will be printed on the survey.</p> <p>A survey packet will be mailed to each family, resident or responsible party listed on the mailing list provided to My InnerView. The envelope contains the appropriate cover letter, survey, comment form and self-addressed (to My InnerView), postage-paid return envelope.</p>
<b>No later than ...</b>		<b>Helpful information</b>
<b>Monday, November 11th</b>	<b>Mail sealed surveys to My InnerView</b>	<p>You can choose to collect the <b>resident</b> surveys at the facility or instruct the <b>residents</b> to mail their individual surveys directly to My InnerView. If you collect the surveys, <b>do not open</b> surveys at the facility. You will mail (in bulk) sealed envelopes directly to My InnerView.</p>
<b>On Going</b>	<b>Monitor survey activity</b>	<p>You can monitor survey activity throughout the survey process. Go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>. Enter your user name/password. On the <b>Home</b> page, click on Satisfaction Survey, then on the Survey Response tab and "Build" to monitor your response rates.</p>
<b>Friday, November 15th</b>	<b>My InnerView's due date for accepting surveys!</b>	<p>The quality of information you can glean from your survey results is directly related to the number of completed surveys returned. It is critical to reinforce the established due date, which is printed on the survey.</p>

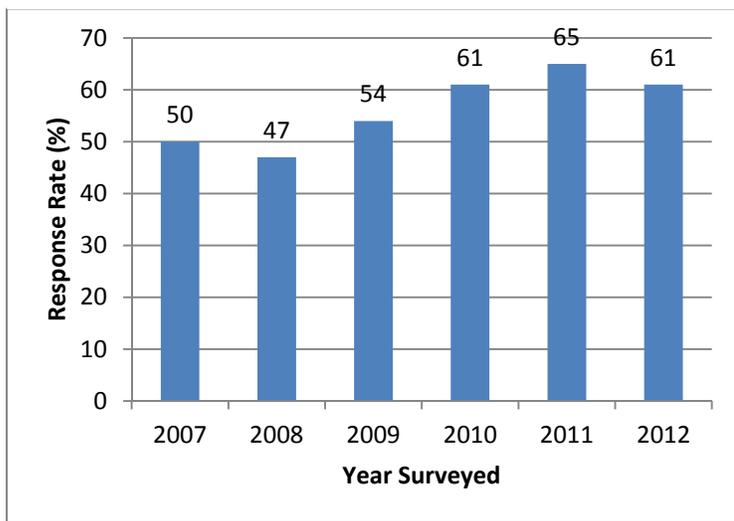
## 2013 Satisfaction Survey Timeline Schedule for Rhode Island Department of Health

		<p>My InnerView as an independent third party handles all survey collection, processing and reporting.</p> <p>Submitted surveys are never read at the facility. On the established due date surveys are electronically scanned by My InnerView into the security-protected system, which will electronically:</p> <ol style="list-style-type: none"> <li>1. Sort surveys by facility name.</li> <li>2. Compile information into the established survey database</li> </ol> <p>Begin the report-generation phase.</p>
<b>No later than ...</b>	<b>You should ...</b>	<b>Helpful information</b>
<b>Friday, November 22nd</b>	<b>Reports published on-line by the <u>end of the business day</u></b>	<p>Access to reports is granted by the Super User of your organization. If you have been assigned access reports will be available at <a href="http://www.myinnerview.com">www.myinnerview.com</a>.</p> <p>For instructions on accessing your survey reports, go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>. Enter your user name/ password. On the <b>Home</b> page, you will find links to several pre-recorded Webinars as well as a schedule of live Webinar dates. Click on <b>HELP</b> or <b>eLearning</b> site to find a library of "How To" guides.</p> <p><b>NOTE:</b> Adobe® Flash® Player 9 must be installed, as it is required to use certain features. For more information on how to install Adobe® Flash® Player 9, go to <a href="http://www.myinnerview.com">www.myinnerview.com</a> and review the How to Prepare Computer document on the eLearning site.</p>
<b>Daily</b>	<b>View comments</b>	<p>Access to Comment Viewer is granted by the Super User of your organization. If you have been assigned access, comments are available at <a href="http://www.myinnerview.com">www.myinnerview.com</a> daily.</p> <p>For instructions on accessing your comments, go to <a href="http://www.myinnerview.com">www.myinnerview.com</a>. Enter your user name/ password. On the Home page click on <b>HELP</b> or <b>eLearning</b> site to find a library of "How To" guides.</p>

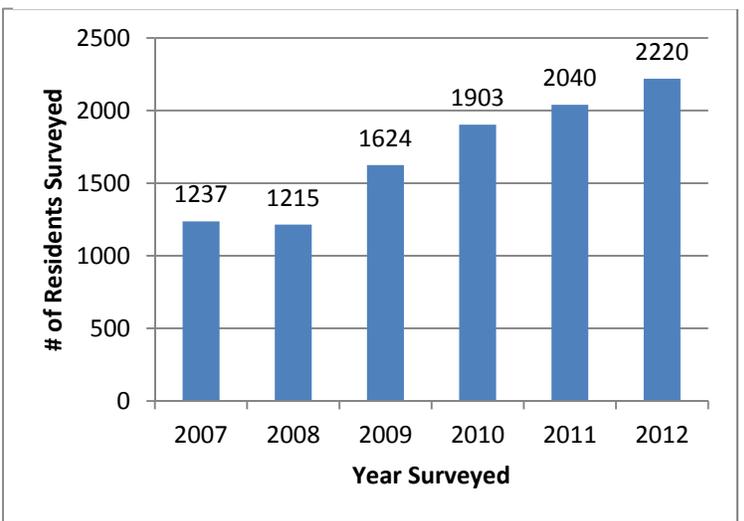


**Nursing Home Satisfaction Survey  
Trend Analysis 2007 – 2012  
RESIDENT TRENDS**

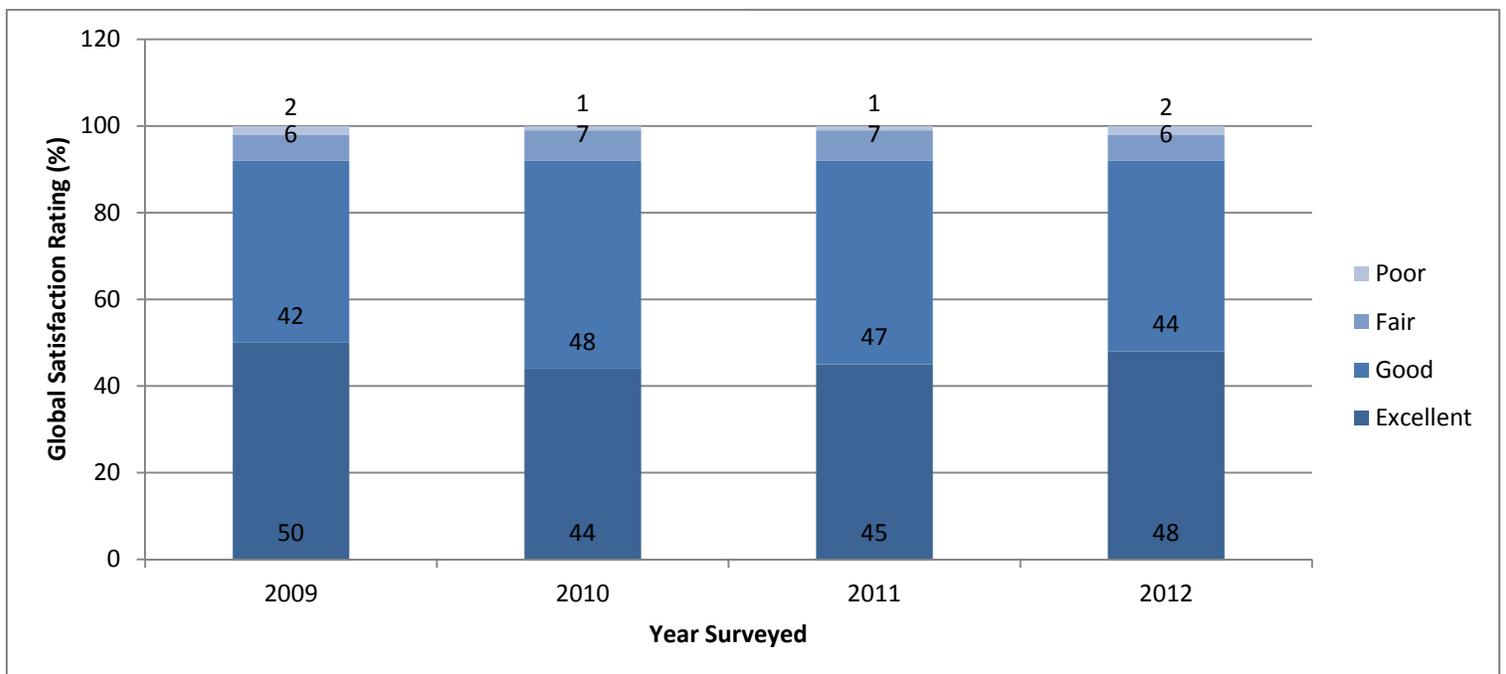
**Resident Response Rate**



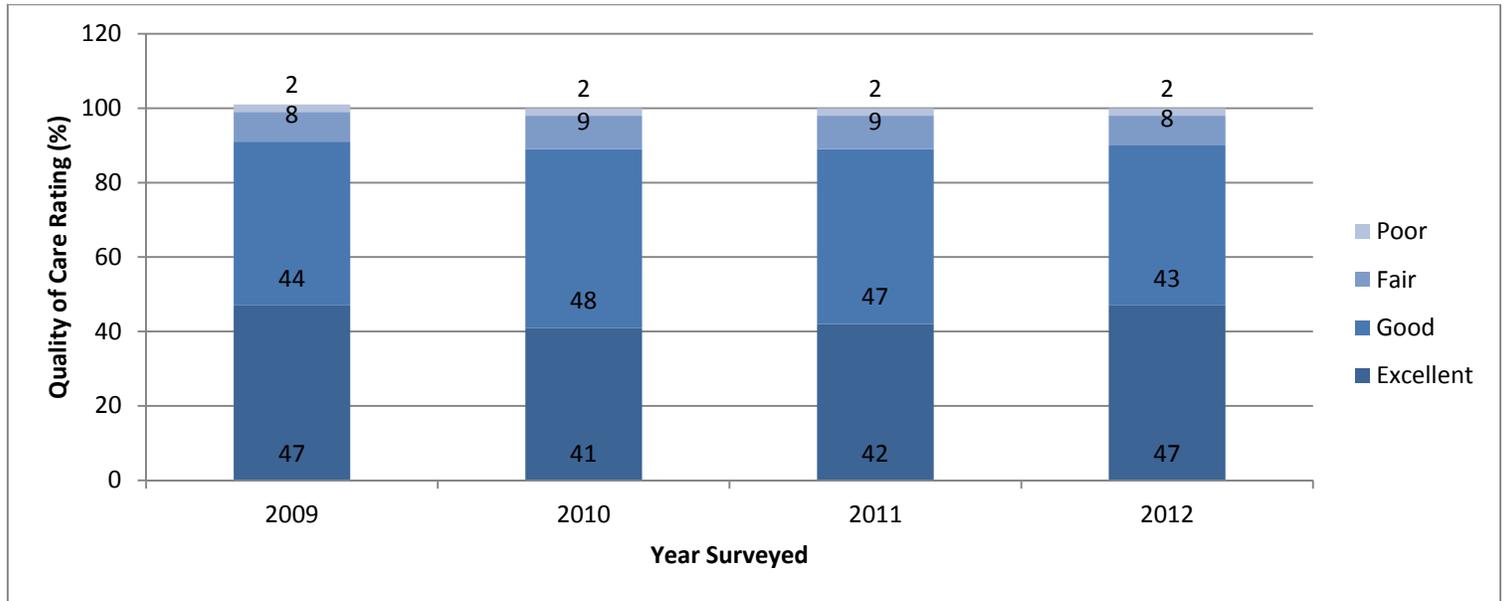
**Number of Resident Respondents**



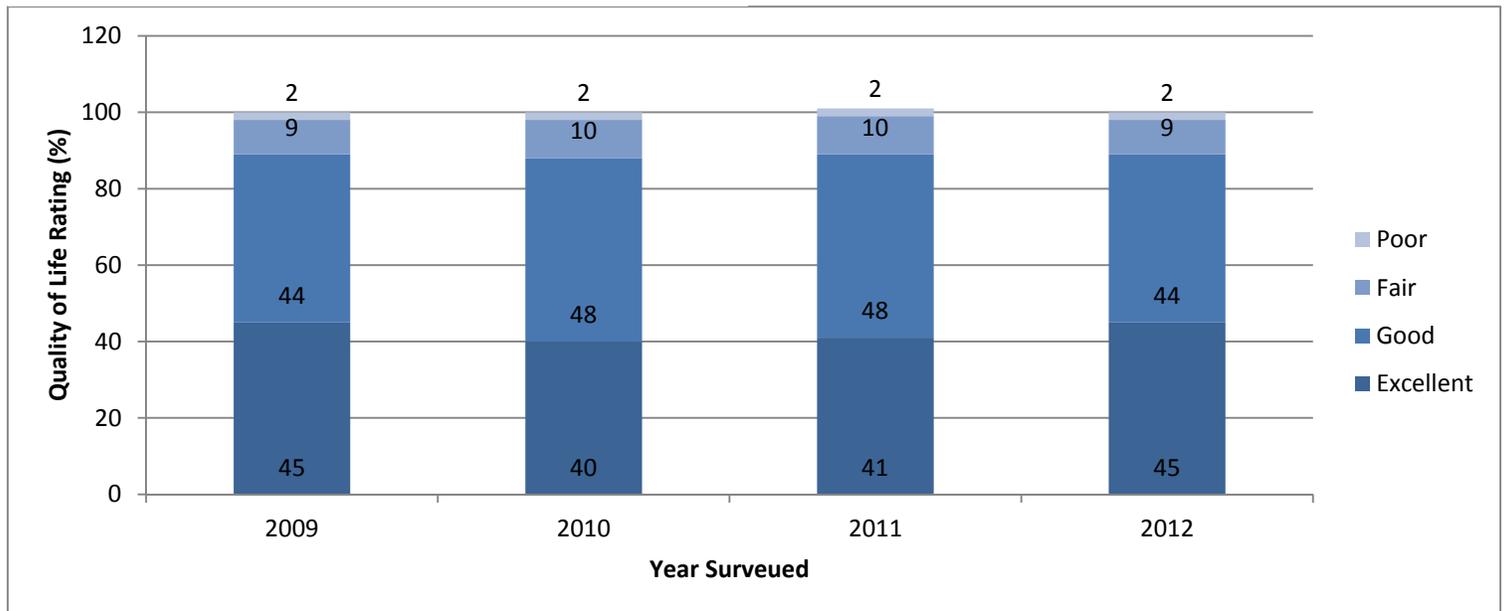
**Resident Global Satisfaction Rating**



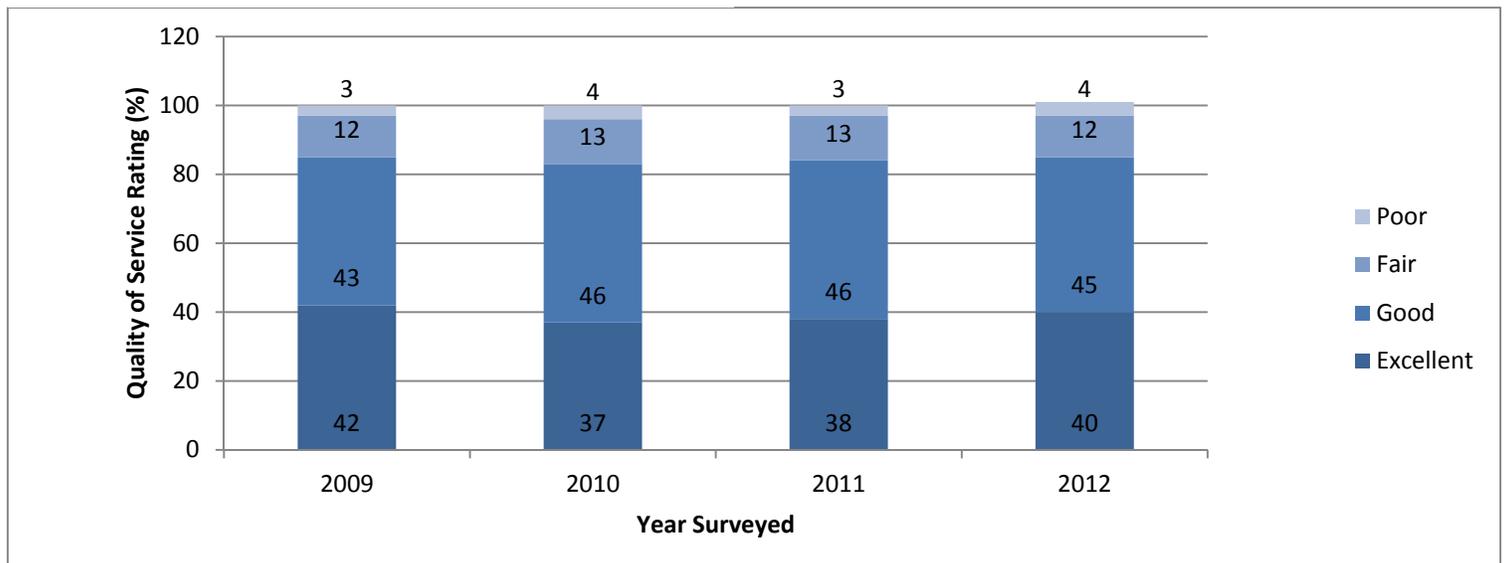
### Resident Quality of Care Rating



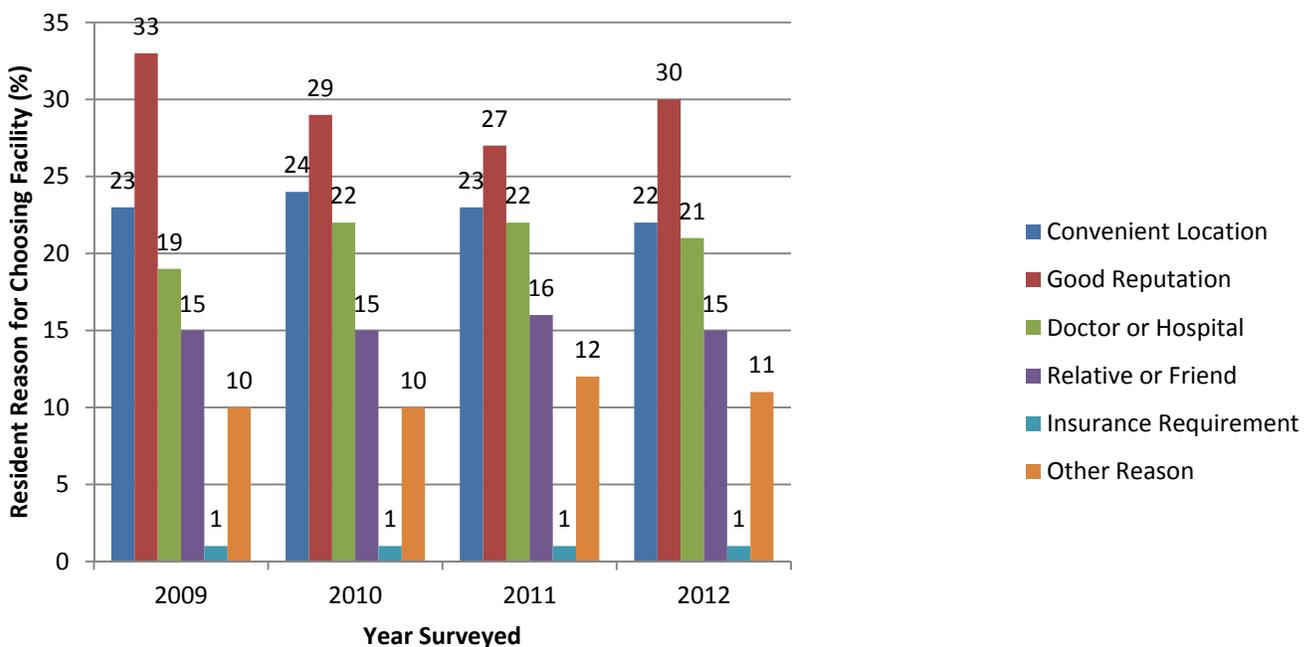
### Resident Quality of Life Rating



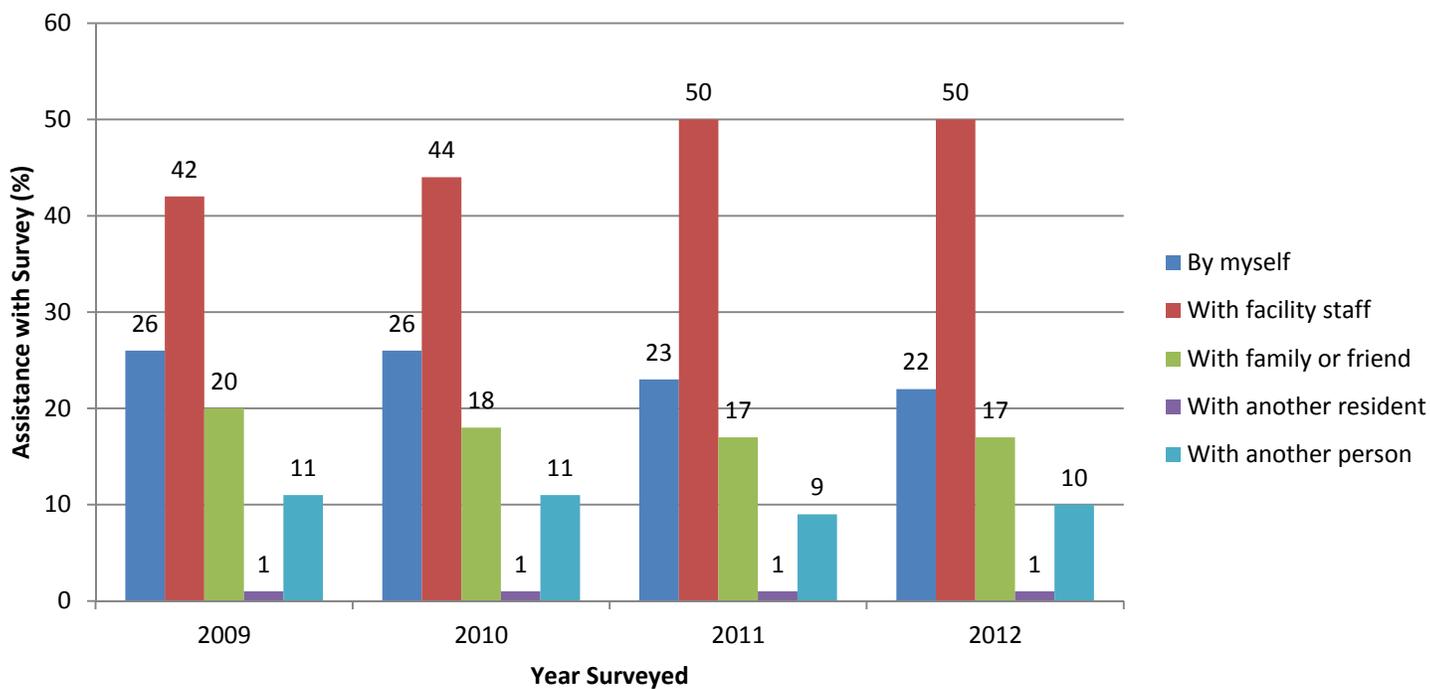
### Resident Quality of Service Rating



### Resident Reason for Choosing Facility



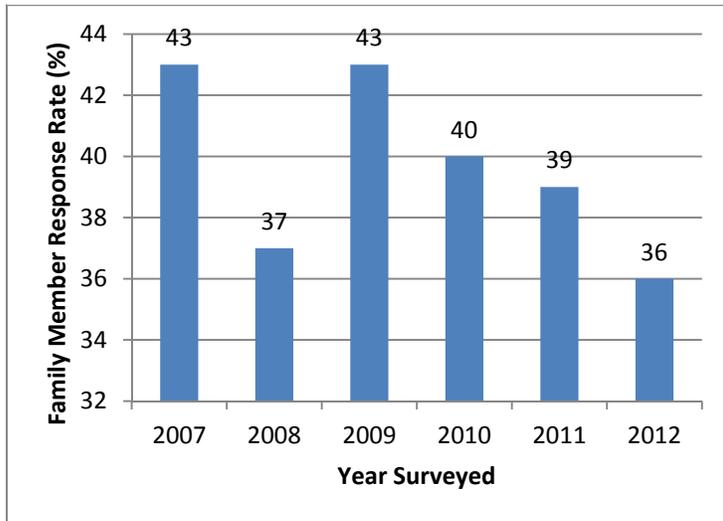
### Resident Assistance with Survey



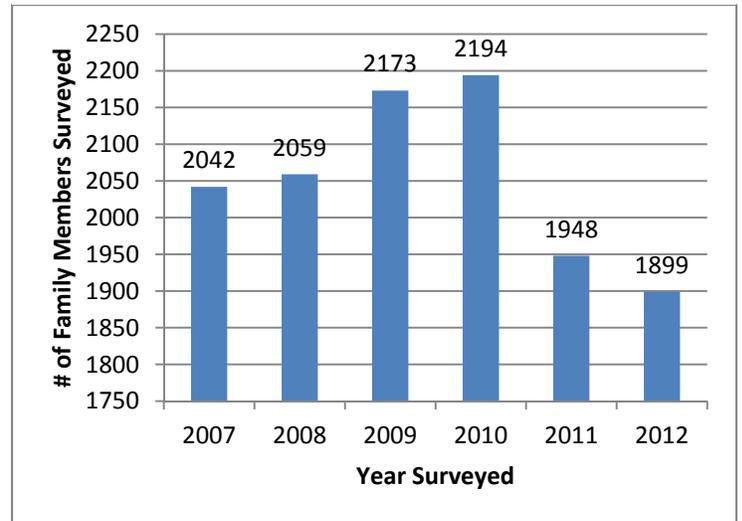


## Nursing Home Satisfaction Survey Trend Analysis 2007 – 2012 FAMILY TRENDS

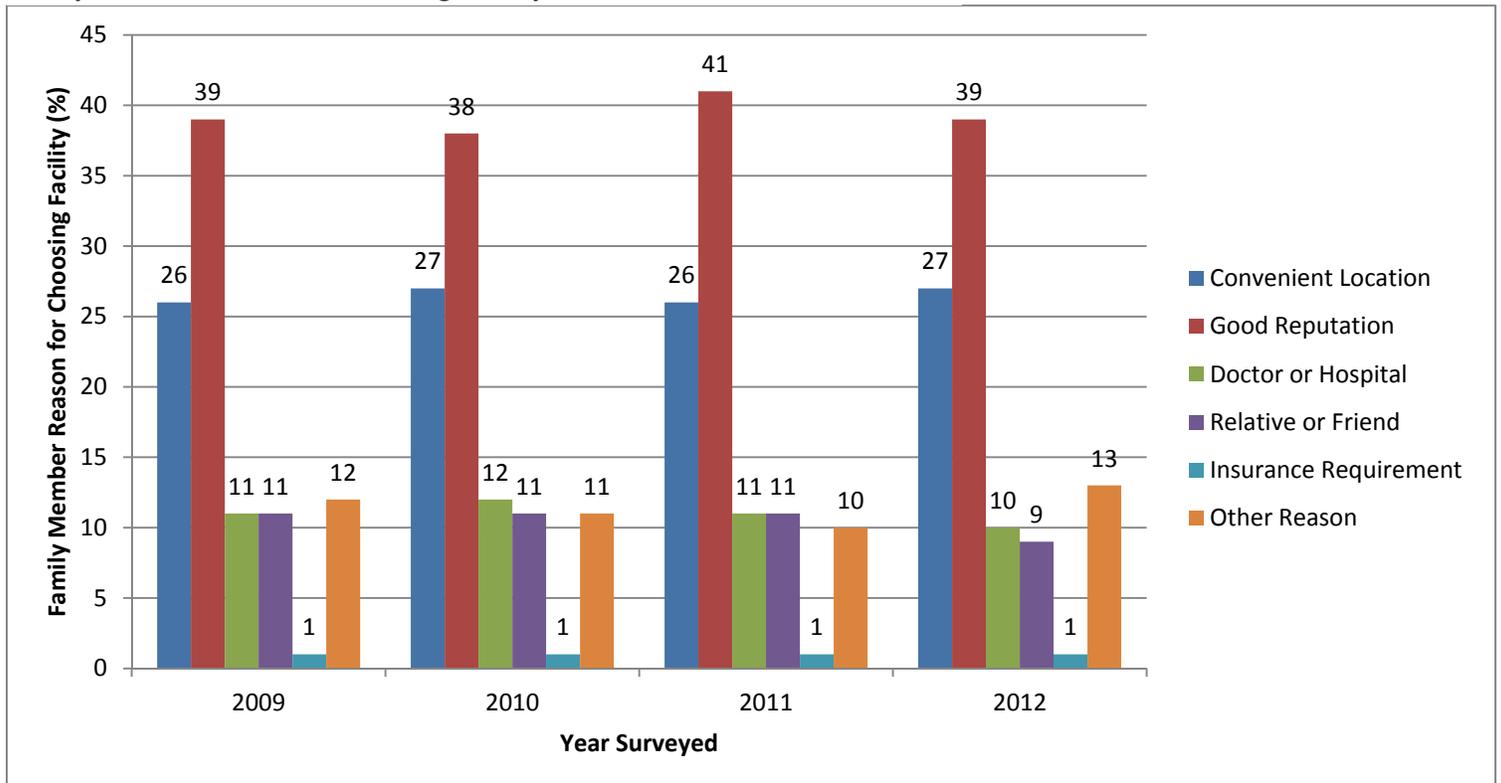
**Family Member Response Rate**



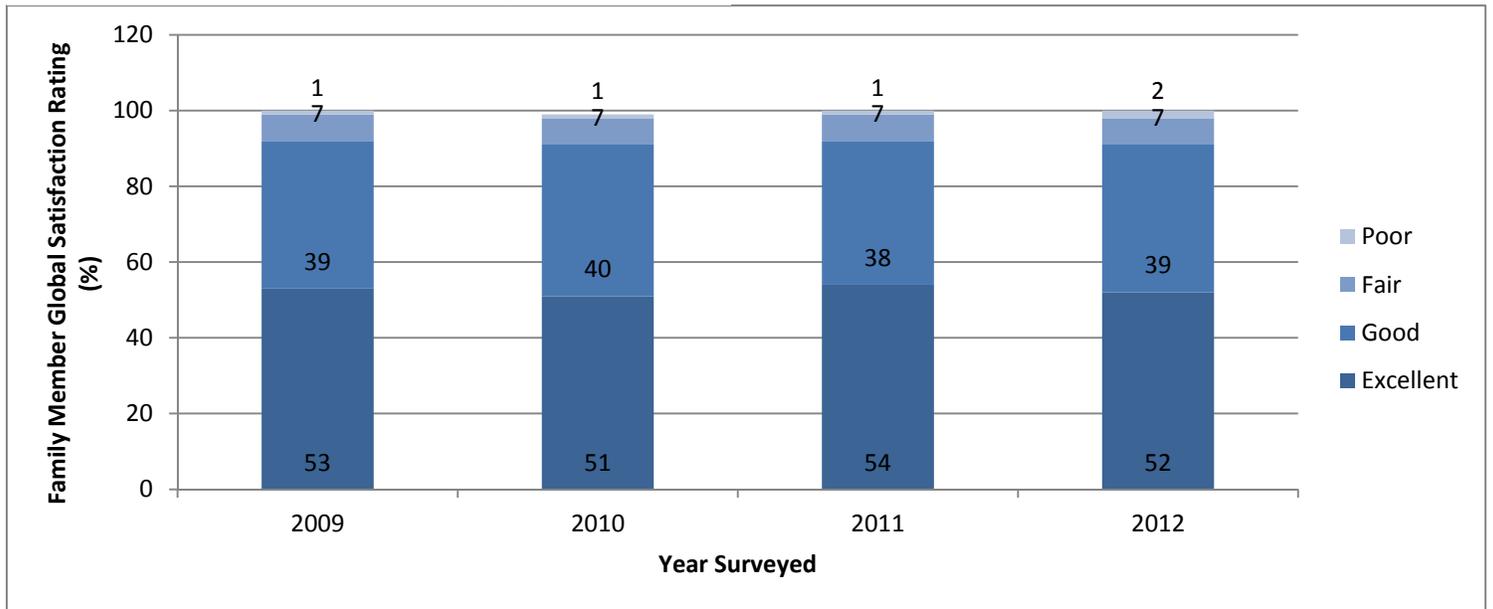
**Number of Family Member Respondents**



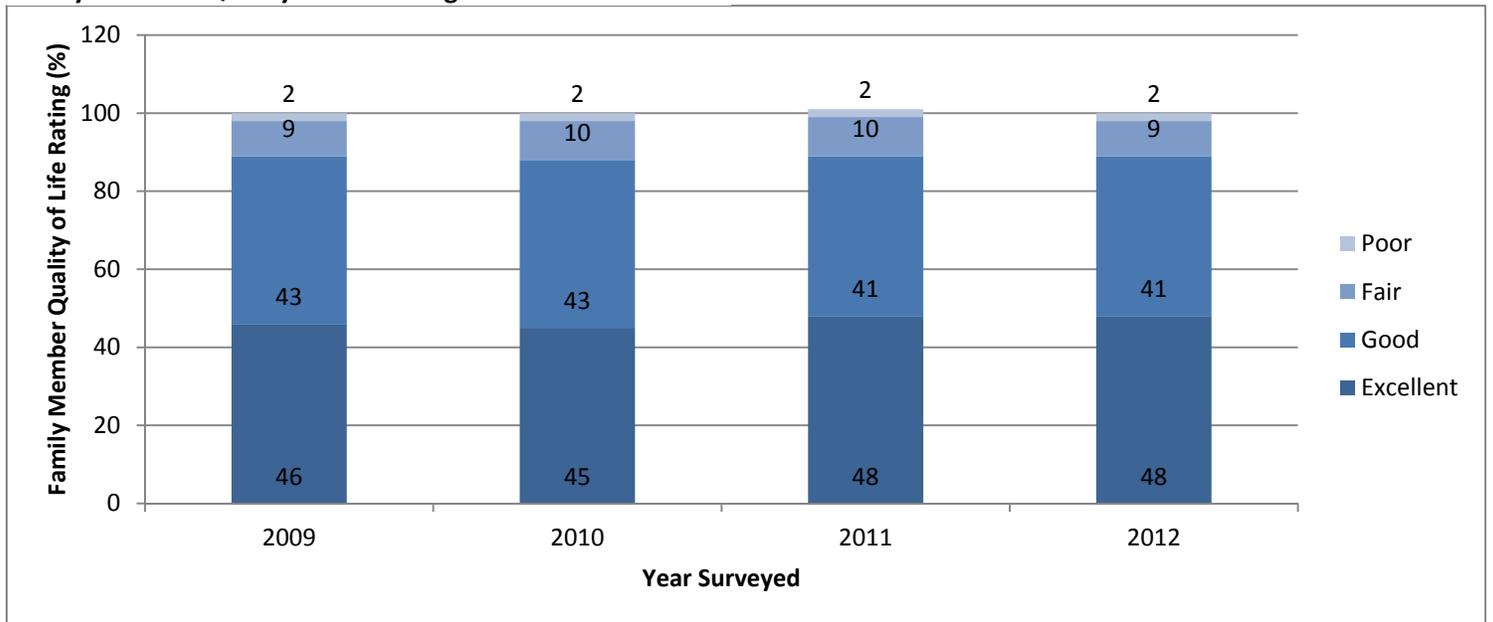
**Family Member Reason for Choosing Facility**



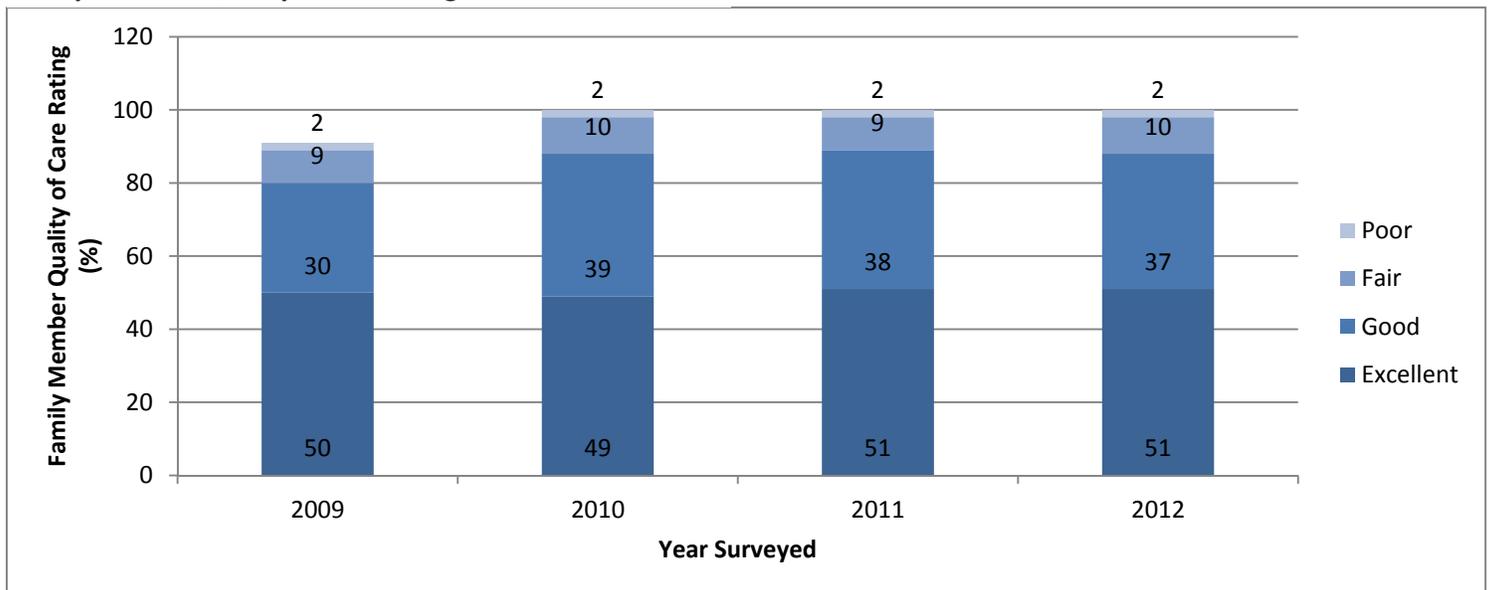
### Family Member Global Satisfaction Rating



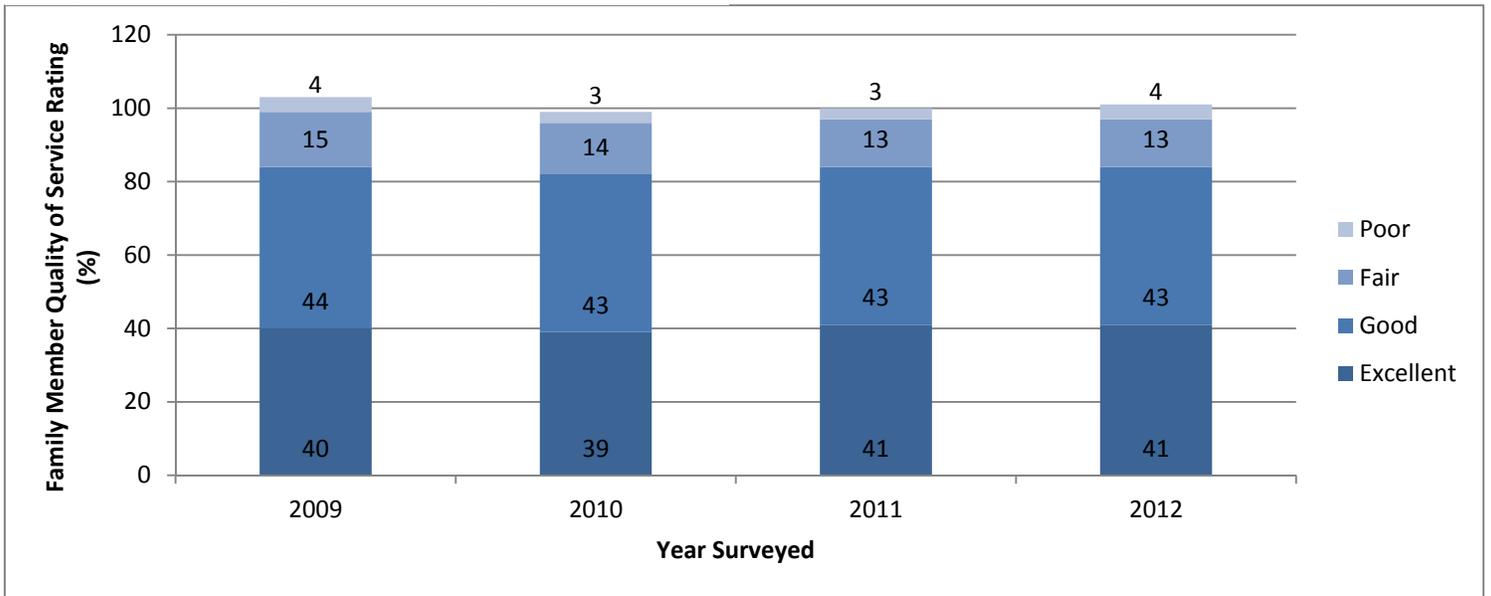
### Family Member Quality of Life Rating



### Family Member Quality of Life Rating



### Family Member Quality of Service Rating





Department of Health

Three Capitol Hill  
Providence, RI 02908-5097

TTY: 711  
[www.health.ri.gov](http://www.health.ri.gov)

## URGENT FAX

August 6, 2013

Dear Nursing Home Administrator:

As you know, participation in the family and resident satisfaction survey process is mandatory and is included in the nursing home regulations. The Rhode Island Department of Health's (HEALTH's) Healthcare Quality Performance Reporting Program and Division of Facilities Regulation track participation closely. Facilities that fail to comply are publicly reported as being unable to provide the data and will receive a state citation.

According to My InnerView's records, your nursing home has a past due balance with My InnerView. Without payment of this balance, you will be unable to participate in the 2013 survey and will receive a state citation.

**Please send your payment for past due balance to My InnerView by August 30, 2013 to remain in regulatory compliance.** Meeting this deadline ensures that your facility can participate in the 2013 survey process and therefore remain in regulatory compliance. For questions regarding your invoice or payment details, please contact Rob Wirth at My InnerView: 800-388-4264 or [rwirth@nationalresearch.com](mailto:rwirth@nationalresearch.com).

Thank you for continuing to support public reporting in Rhode Island.

Sincerely,

A handwritten signature in cursive script that reads "Samara Viner-Brown".

Samara Viner-Brown, MS  
Chief, Center for Health Data and Analysis  
[samara.viner-brown@health.ri.gov](mailto:samara.viner-brown@health.ri.gov)



RECOVERY CENTER	EAST PROVIDENCE	5/31/07 4/4/08	25	22	18	7	14	86
WATER VIEW VILLA AND REHAB CENTER	EAST PROVIDENCE	3/08/07 3/14/08	25	21	18	8	14	86
HATTIE IDE CHAFFEE HOME	EAST PROVIDENCE	7/10/06 4/3/08	25	21	17	8	14	85
ORCHARD VIEW MANOR	EAST PROVIDENCE	5/12/06 6/8/07	24	22	18	8	13	85
EVERGREEN HOUSE HEALTH CENTER	EAST PROVIDENCE	5/15/06 5/24/07	24	19	18	8	13	82
SHADY ACRES NANCY ANN NURSING HOME	EXETER	9/14/06 8/23/07	25	21	18	8	14	86
HAVEN HEALTH CENTER OF GREENVILLE	FOSTER	8/10/06 8/9/07	24	21	18	7	11	81
CORTLAND PLACE	GREENVILLE	2/22/07 1/16/08	25	21	17	8	14	85
BRIARCLIFFE MANOR	GREENVILLE	3/16/07 1/28/08	24	21	18	8	13	84
MORGAN HEALTH CENTER	JOHNSTON	2/15/07 12/7/07	26	22	17	8	14	87
CHERRYHILL MANOR	JOHNSTON	12/14/06 1/17/08	24	21	18	7	13	83
HOLIDAY RETIREMENT HOME	JOHNSTON	10/20/06 11/26/07	22	19	16	8	13	78
GRAND ISLANDER CENTER	LINCOLN	4/5/07 2/8/08	26	22	18	8	14	88
FOREST FARM HEALTH CARE	MIDDLETOWN	08/31/07 07/25/08	25	22	18	8	14	87
JOHN CLARKE RET. CENTER	MIDDLETOWN	11/9/06 11/17/07	25	20	18	8	14	85
VANDERBILT REHAB. CTR.	MIDDLETOWN	6/30/08 9/24/08	25	20	17	8	14	84
ST. CLARE'S HOME FOR THE AGED	NEWPORT	8/4/04 11/01/05	26	22	18	8	14	88
HEATHERWOOD NURSING AND SUBACUTE CENTER	NEWPORT	3/8/07 3/19/08	25	21	18	8	14	86
VILLAGE HOUSE CONVALESCENT HOME	NEWPORT	12/8/06 12/31/07	25	19	18	8	14	84
	NEWPORT	10/27/06 10/26/07	25	22	18	8	14	84

ROBERTS HEALTH CENTER	NORTH KINGSTON	2/9/07 4/4/08	25	22	18	8	13	86
SCALABRINI VILLA	NORTH KINGSTON	5/31/06 6/18/07	25	20	18	8	14	85
SOUTH COUNTY NURSING / SUBACUTE	NORTH KINGSTON	3/26/07 2/18/08	23	22	18	8	14	85
GOLDEN CREST NURSING CENTER	NORTH PROVIDENCE	11/30/06 10/29/07	24	21	18	7	12	82
HOPKINS MANOR	NORTH PROVIDENCE	11/20/06 10/26/07	23	20	17	8	13	81
ST. ANTOINE RESIDENCE	NORTH SMITHFIELD	8/31/07 8/29/08	26	22	18	8	14	88
WOODLAND CONVALESCENT CENTER	NORTH SMITHFIELD	7/3/07 7/3/08	24	21	18	8	11	82
JEANNE JUGAN RESIDENCE	PAWTUCKET	4/4/07 3/20/08	26	22	18	8	14	88
JAK HILL NURSING & REHAB CENTER	PAWTUCKET	10/10/06 11/9/07	25	21	17	7	14	84
HAVEN HEALTH CENTER OF PAWTUCKET	PAWTUCKET	12/7/07 8/6/08	24	20	14	7	10	75
ROCKWOTTON HOME	PROVIDENCE	2/9/07 5/4/07	26	22	18	8	14	88
HALLWORTH HOUSE	PROVIDENCE	08/09/07 07/01/08	25	20	18	8	14	85
CHARLES GATE NURSING CENTER	PROVIDENCE	9/13/07 6/13/08	24	21	18	8	14	85
ELMWOOD HEALTH CENTER	PROVIDENCE	12/7/06 2/1/08	24	22	18	8	14	86
POCH SENIOR HEALTHCARE	PROVIDENCE	4/13/07 4/24/08	25	21	18	8	14	86
ELMHURST EXTENDED CARE FACILITY	PROVIDENCE	5/11/07 4/4/08	25	22	17	7	14	85
Inn Health Care Center East	PROVIDENCE	1/8/07 12/21/07	24	22	18	7	14	85
WANNISTER HOUSE	PROVIDENCE	4/11/07 2/29/08	25	21	18	7	13	84
TEERE HOUSE NURSING/ REHAB	PROVIDENCE	9/22/06 11/8/07	25	21	18	8	11	83
BERKSHIRE PLACE	PROVIDENCE	11/21/06 12/19/07	24	22	17	7	12	82

NURSING CENTER	PROVIDENCE	6/17/05 7/14/06	24	20	17	7	13	81
BETHANY HOME OF RI	PROVIDENCE	05/07/07 4/11/08	24	18	17	8	14	81
ST. JOSEPH HOSPITAL / SPECIALTY CARE	PROVIDENCE	2/17/06 5/03/07	25	22	18	6	14	85
PARK VIEW NURSING HOME	PROVIDENCE	1/05/07 2/15/08	24	22	17	8	13	84
KINDRED HEIGHTS NURSING & HERITAGE HILLS NURSING CENTER	RIVERSIDE	3/15/07 2/7/08	25	21	17	8	14	85
NORTH BAY MANOR	SMITHFIELD	4/20/07 6/6/08	25	22	18	8	14	87
HEBERT'S NURSING HOME	SMITHFIELD	4/27/08 8/14/08	25	22	18	8	14	87
SCALLOP SHELL NURSING HOME & REHAB CENTER	SMITHFIELD	1/19/07 12/18/07	24	21	18	8	14	85
SOUTH KINGSTON NURSING/ REHAB CENTER	SOUTH KINGSTON	4/22/05 6/7/07	26	22	18	8	14	88
CRESTWOOD NURSING & CONVALESCENT HOME	SOUTH KINGSTON	9/13/07 7/11/08	25	22	18	8	14	87
GRACE BARKER NURSING CENTER	WARREN	7/26/07 11/6/07	24	22	18	8	14	86
HAVEN HEALTH CENTER OF WARREN	WARREN	3/22/07 3/7/08	25	21	18	8	14	86
SUNNY VIEW NURSING HOME	WARREN	6/13/07 1/7/08	24	21	17	8	14	84
BRENTWOOD NURSING HOME	WARWICK	4/26/07 5/15/08	26	21	18	8	14	87
KENT REGENCY CENTER	WARWICK	4/5/07 2/6/08	26	22	18	7	12	85
WEST SHORE HEALTH CENTER	WARWICK	11/15/06 10/16/07	24	22	18	8	13	85
AVALON NURSING HOME	WARWICK	10/6/06 11/28/07	24	22	18	8	13	85
HARBORSIDE	WARWICK	05/16/07 06/30/08	26	22	16	8	12	84

HEALTH CARE / AWTUXET ILLAGE	WARWICK	9/5/07 8/8/08	24	21	18	8	13	84
ARBORSIDE EHAB /								
GREENWOOD WEST VIEW	WARWICK	2/22/07 1/23/08	21	21	17	7	13	79
HEALTH CENTER WESTERLY	WEST WARWICK	7/21/06 8/27/07	24	22	18	8	13	85
NURSING HOME	WESTERLY	12/14/06 1/4/08	26	22	17	8	14	87
WESTERLY HEALTH CENTER	WESTERLY	3/21/08 8/28/08	24	20	18	8	14	84
CLIPPER HOME	WESTERLY	6/7/07 5/8/08	24	20	18	8	14	84
WATCH HILL ARE AND EHAB	WESTERLY	12/7/06 1/14/08	21	21	18	8	13	81
ALLOU HOME FOR THE AGED	WOONSOCKET	01/12/07 2/4/08	26	22	18	8	14	88
FRIENDLY HOME	WOONSOCKET	10/5/07 8/18/08	26	21	18	8	14	87
WOONSOCKET HEALTH CENTER	WOONSOCKET	8/7/06 10/12/07	26	21	17	8	13	85
AKLAND GROVE HEALTH CARE CENTER	WOONSOCKET	10/20/06 1/8/08	23	22	18	7	12	82
T. ST. FRANCIS HEALTH CENTER	WOONSOCKET	8/20/07 7/11/08	25	20	16	8	14	83

<b>Provider Number</b>	<b>Provider Name</b>	<b>Overall</b>	<b>Health Inspection</b>	<b>MDS Quality Measures</b>	<b>Staffing</b>	<b>RN Staffing</b>	<b>Survey Score</b>
415004	WESTERLY NURSING HOME INC	*****	*****	*****	****	*****	0.00
415012	BRIARCLIFFE MANOR	*****	*****	*****	****	****	0.00
415040	FOREST FARM HEALTH CARE CENTER	*****	*****	*****	****	*****	0.00
415073	JEANNE JUGAN RESIDENCE	*****	*****	****	*****	*****	0.00
415085	MOUNT ST RITA HEALTH CENTRE	*****	*****	****	*****	*****	0.00
415104	ROBERTS HEALTH CENTRE	*****	*****	**	****	*****	0.00
415024	HALLWORTH HOUSE	*****	****	*****	*****	*****	2.00
415113	TOCKWOTTON ON THE WATERFRONT	*****	*****	*****	*****	*****	2.00
415014	GRACE BARKER NURSING CENTER	*****	****	*****	***	***	2.67
415096	BETHANY HOME OF RHODE ISLAND	*****	****	****	*****	*****	2.67
415023	SUNNY VIEW NURSING HOME	*****	****	*****	****	*****	3.33
415045	OVERLOOK NURSING	*****	****	*****	****	*****	4.00
415084	ELMHURST EXTENDED CARE FACILITY	*****	****	*****	****	****	4.67
415061	BRENTWOOD NURSING HOME	*****	****	*****	***	****	5.33
415060	AVALON NURSING HOME	*****	****	*****	****	*****	6.00
415034	GRAND ISLANDER CENTER	*****	****	*****	****	*****	6.67
415108	HARRIS HEALTH CARE CENTER-NORTH	*****	***	*****	****	*****	9.33
415066	CRA-MAR MEADOWS	*****	***	*****	****	*****	10.00
415068	WARREN SKILLED NURSING	*****	***	*****	****	*****	11.33
415111	ST CLARE HOME	*****	***	*****	****	*****	13.33

<b>Provider Number</b>	<b>Provider Name</b>	<b>Overall</b>	<b>Health Inspection</b>	<b>MDS Quality Measures</b>	<b>Staffing</b>	<b>RN Staffing</b>	<b>Survey Score</b>
415120	APPLE REHAB CLIPPER	****	****	**	****	*****	0.67
415054	SOUTH KINGSTOWN NURSING	****	****	****	***	****	1.33
415009	KENT REGENCY CENTER	****	****	****	****	*****	2.67
415115	NANCY ANN NURSING HOME, INC.	****	****	**	****	*****	2.67
415015	APPLE REHAB WATCH HILL	****	****	****	****	*****	3.33
415044	FRIENDLY HOME INC, THE	****	****	****	****	****	4.00
415070	CRESTWOOD NURSING & CONV HOME	****	****	****	****	*****	4.00
415072	ELMWOOD HEALTH CENTER	****	****	**	****	*****	4.00
415074	VILLAGE HOUSE CONVALESCENT HOME	****	****	***	***	*****	4.00
415105	WOODPECKER HILL HEALTH CENTER	****	****	***	****	*****	4.00
415129	SUMMIT COMMONS REHABILITATION	****	****	****	****	****	4.00
415126	EPOCH ON BLACKSTONE BOULEVARD	****	****	***	****	*****	4.67
415091	STEERE HOUSE NURSING	****	****	****	****	****	5.33
415010	SAINT ELIZABETH HOME, E. GREENWICH	****	***	****	*****	*****	6.67
415007	CHESTNUT TERRACE NURSING	****	***	**	****	*****	7.33
415042	WATERVIEW VILLA REHABILITATION	****	***	****	****	***	7.33
415028	WEST SHORE HEALTH CENTER	****	***	*****	**	****	8.00
415063	SCALABRINI VILLA	****	***	*****	**	****	8.00
415094	BALLOU HOME FOR THE AGED	****	***	***	*****	*****	8.00
415075	HOLIDAY RETIREMENT HOME INC	****	***	***	****	****	9.33
415041	WOONSOCKET HEALTH CENTRE	****	***	***	****	****	10.67
415089	ALPINE NURSING HOME INC	****	***	****	****	*****	10.67
415067	WEST VIEW HEALTH CARE CENTER	****	***	****	****	****	12.00
415076	JOHN CLARKE RETIREMENT CTR.	****	***	***	*****	*****	12.00
415090	LINN HEALTH CARE CENTER	****	***	**	****	*****	12.67
415057	SCALLOP SHELL NURSING	****	**	*****	*****	*****	18.00

<b>Provider Number</b>	<b>Provider Name</b>	<b>Overall</b>	<b>Health Inspection</b>	<b>MDS Quality Measures</b>	<b>Staffing</b>	<b>RN Staffing</b>	<b>Survey Score</b>
415031	SILVER CREEK MANOR	***	***	***	**	****	8.00
415008	GREENWOOD CARE AND REHABILITATION	***	***	***	**	****	8.67
415020	GRANDVIEW CENTER	***	***	****	***	****	8.67
415082	RIVERVIEW HEALTHCARE COMMUNITY	***	***	****	***	****	8.67
415083	EASTGATE NURSING & REHABILITATION	***	**	****	*****	*****	13.33
415107	SHADY ACRES INC	***	***	*	****	*****	14.00
415059	ORCHARD VIEW MANOR NURSING	***	**	****	****	****	14.67
415002	HATTIE IDE CHAFFEE HOME	***	**	****	****	****	15.33
415033	HEATHERWOOD NURSING	***	**	****	****	*****	16.00
415106	ST ANTOINE RESIDENCE	***	**	**	****	****	17.33
415053	CHERRY HILL MANOR	***	**	***	****	*****	18.67
415086	NORTH BAY RETIREMENT LIVING	***	**	****	*****	*****	18.67
415029	GOLDEN CREST NURSING CENTRE	***	**	***	****	***	19.33
415027	KINDRED TRANSITIONAL CARE - OAK HILL	***	**	****	****	*****	20.00
415039	HERITAGE HILLS NURSING	***	**	***	****	****	21.33
415119	BERKSHIRE PLACE	***	**	***	****	****	21.33
415050	SAINT ELIZABETH MANOR, EAST BAY	***	**	***	*****	*****	28.00

Provider Number	Provider Name	Overall	Health Inspection	MDS Quality Measures	Staffing	RN Staffing	Survey Score
415080	BAYBERRY COMMONS	**	**	****	***	***	16.00
415071	SOUTH COUNTY NURSING & SUBACUTE	**	**	****	**	***	20.00
415081	WESTERLY HEALTH CENTER	**	**	****	**	****	20.67
415110	OAKLAND GROVE HEALTH CARE CENTER	**	**	****	***	****	22.00
415052	CHARLESGATE NURSING CENTER	**	**	****	Data Not Available	Data Not Available	22.33
415035	HOPKINS MANOR LTD	**	*	**	****	****	24.00
415056	EVERGREEN HOUSE HEALTH CENTER	**	*	****	****	*****	24.00
415079	TRINITY HEALTH AND REHABILITATION	**	**	****	**	**	26.00
415098	HARRIS HEALTH CENTER, LLC	**	*	****	****	*****	29.33
415078	COVENTRY SKILLED NURSING	**	*	**	****	****	32.00
415038	BANNISTER HOUSE INC	**	*	*****	**	***	37.33
415087	GREENVILLE SKILLED NURSING	**	*	***	****	****	38.00
415051	SCANDINAVIAN HOME INC	**	*	*****	*****	*****	45.00
415032	CEDAR CREST NURSING CENTRE INC	**	*	****	****	*****	97.00
415097	MANSION NURSING AND REHABILITATION	**	*	*****	****	****	182.83
415036	PARK VIEW NURSING HOME	**	*	****	****	****	246.17
415062	MORGAN HEALTH CENTER	*	**	****	*	**	14.00
415099	PINE GROVE HEALTH CENTER	*	*	*	****	*****	28.00
415064	PAWTUCKET SKILLED NURSING	*	*	****	***	***	49.33
415049	HEBERT NURSING HOME	*	*	**	*	**	327.33
415123	CORTLAND PLACE	*	*	****	***	****	1438.83