

State of Florida Agency for Persons with Disabilities

Harmony for APD iConnect Residential Monitoring Training Manual

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Chapter 16 | Residential Monitoring

Introduction

Residential Monitoring is completed monthly for every licensed residential facility that has residents. If the Residential facility is vacant then the monitoring can be done quarterly. Monitoring can be done more frequently than monthly and unannounced, if it is known or suspected that a facility is not in full compliance with rules, to investigate complaints or to follow up on health, safety, and well-being of residents. There will also be annual license renewal inspections conducted.

Generate Report



A report will be run to identify Residential Facilities that will need to be audited for the month.

1. Set "Role" = Region QA Workstream Worker then click Go.



2. Navigate to My Dashboard and select the Residential Monitoring Monthly/Quarterly Report to identify facilities that need to be audited.



opd iConnect

3. Select the Residential Monitoring Monthly/Quarterly Report

https://ltssbh1.me	diware.com	/FLAPDInter	rfaceTest/Pa	ges/Report.aspx?ReportID=11363&SC	Fld=ID&SCOp	=Equal%20	To&SCVal=()&secure=nJ	IZnxP73	
HTML				✓ Export						
i4 4 1 of 2 ? ▶ ▶i	\$	Find Next	📕 • 📀							
Monthly and Quarterly Monitor Report										
Corporate Provider Name	Relationship	Subsidiary	Subsidiary	Subsidiary Provider Name	Subsidiary	Subsidiary	Subsidiary	Count of	Flag	
Corporate Provider Name	Relationship	Subsidiary Region	Subsidiary Provider ID	Subsidiary Provider Name	Subsidiary Licensed capacity	Subsidiary Enrolltype	Subsidiary Disposition	Count of Enrollments on Subsidary Providers	Flag	
Corporate Provider Name REDEFINING ABILITIES LLC	Relationship	Subsidiary Region Central	Subsidiary Provider ID 20138	Subsidiary Provider Name THE WRIGHT HOUSE	Subsidiary Licensed capacity 4	Subsidiary Enrolltype	Subsidiary Disposition	Count of Enrollments on Subsidary Providers	Flag Quarterly	
Corporate Provider Name REDEFINING ABILITIES LLC REDEFINING ABILITIES LLC	Relationship Subsidiary Subsidiary	Subsidiary Region Central	Subsidiary Provider ID 20138 20845	Subsidiary Provider Name THE WRIGHT HOUSE Grace House	Subsidiary Licensed capacity 4 5	Subsidiary Enrolltype	Subsidiary Disposition	Count of Enrollments on Subsidary Providers	Flag Quarterly Quarterly	
EDEFINING ABILITIES LLC EEDEFINING ABILITIES LLC TARBRITE GROUP HOME, INC. ANILA F	Relationship Subsidiary Subsidiary Subsidiary	Subsidiary Region Central SOUTHERN	Subsidiary Provider ID 20138 20845 10404	Subsidiary Provider Name THE WRIGHT HOUSE Grace House STARBRITE GROUP HOME	Subsidiary Licensed capacity 4 5 6	Subsidiary Enrolltype	Subsidiary Disposition	Count of Enrollments on Subsidary Providers	Flag Quarterly Quarterly Quarterly	
Corporate Provider Name REDEFINING ABILITIES LLC REDEFINING ABILITIES LLC STARRRITE GROUP HOME, INC. JANILA F GROUP HOME, INC. JANILA F GROUP HOME, INC.	Relationship Subsidiary Subsidiary Subsidiary Subsidiary	Subsidiary Region Central SOUTHERN SOUTHERN	Subsidiary Provider ID 20138 20845 10404 10409	Subsidiary Provider Name THE WRIGHT HOUSE Grace House STARBRITE GROUP HOME LIVINGSTON-MORRIS GROUP HOME, INC.	Subsidiary Licensed capacity 4 5 6 6	Subsidiary Enrolltype	Subsidiary Disposition	Count of Enrollments on Subsidary Providers	Flag Quarterly Quarterly Quarterly Quarterly	

Add Residential Monitor



If the Provider's demographics page does not have a Residential monitor assigned, the Residential Monitor (Region QA Workstream worker) will add the information.

1. Set "Role" = Region QA Workstream Worker then click **Go.**

	\
Role	
Region QA Workstream Worker	GO GO

2. Navigate to the **Providers** chapter and enter the Provider's Facility home name in the Quick Search filter and click go.

opd iConnect		Welc 6200
File		
	Quick Search	
	A Test Provider X Providers	Provider Name 💟 GO
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS SCHEDULER
- Filters		

3. The Provider's record will display. Navigate to the **Providers > Providers** tab.



4. Select Edit > Edit Provider to open the Provider's Facility record



5. Click the ellipsis on the Residential Monitor field to search for and select the worker that is to be assigned as the Residential Monitor

Provider	Basic Information								
Addresses	Provider Name *	Test Provider							
Talashara Number(a)	DBA (if applicable)/Facility Name								
relephone Number(s)	APD Vendor Number								
	Plans Require Validation								
	WSC QO	~							
	Active *								
	External	\checkmark							
	Exclude from Selection								
	Specialist/Liaison	Reed, Monica		Clear	Details				
	Residential Monitor	Reed, Monica		Clear	Details				

6. When finished, Select File > Save and Close Provider



Schedule Site Visit Appointment

If the site visit will be announced, the Residential Monitor (Region QA Workstream worker) will call the Service Provider to schedule the site visit. The appointment information will be entered into APD iConnect.



NOTE: If it is an unannounced site visit, the Residential Monitor (Region QA Workstream worker) will just add the appointment information into APD iConnect without calling the Service Provider or adding him/her as a Participant to the appointment. The Service Provider will not be able to see the unannounced site visit in iConnect.

1. Set "Role" = Region QA Workstream Worker then click Go.



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.



3. The Provider's record will display. Navigate to the **Providers > Appointments** tab.

	MY DASHB	OARD C	ONSUMERS	PRO	VIDERS	IN	CIDENT	rs	CLAIMS	SCH	EDULER	UTIL	ITIES	
A TEST Provider (10002)										,				
	Workers :	Services P	Provider ID Num	bers C	ontracts	Beds	Linked	d Providers	Aliases	Conditions	s Sorvice	Area Ad	Imin Action	3
View Style State Uiex Style Uiex View Monthly View View View	Iters	Equal To	✓ Pe	nding 🗸	AND	•	×	C C C C C C C C C C C C C C C C C C C						
Search Reset														
4 Appointments record(s) returned - now view	ing 1 through	4				itart Da	te					End Date		
Site Visit			06/21/2	2018					06	/21/2018		and pate		

4. Click File > Add Appointment



- 5. Update the following fields on the Appointment Details page
 - a. "Division" = APD
 - b. "Appointment Date" = Enter date
 - c. "Start Time" = Enter time
 - d. "Appointment End Date" = Enter Date
 - e. "End Time" = Enter time
 - f. "Type" =
 - i. Site Visit
 - ii. Unannounced if the Provider should not be informed of the site visit
 - g. "Subject" = Enter description
 - h. "Status" = Scheduled

opd iConnect	
File	
Appointments	
Division	APD 🗸
Appointment Date *	08/25/2023
Start Time	03 🗸 00 🖌 PM 🗸
Appointment End Date	08/25/2023
End Time	04 🗸 00 🗸 PM 🗸
Type *	Site Visit 🗸
Subject	Description of Site Visit
Status *	Scheduled V

6. When finished select File > Save Appointment



7. If this is an *announced* site visit, Click **New Participant** on the left-hand navigation menu if the appointment.



8. Set the **Non-Participants filter** list to Current Active Provider Workers or whatever is applicable in order to select the appointment participants

	<u> </u>										
Appointment	Participants	Non-Participants									
Participants List		Filter Family Relations									
New Participant	Application, Harmony Buck, Jennifer	Case Kelations Professional Relations Current Active Provider Workers									

 Select the appropriate Residential Monitor and Service Provider Worker names by holding the control key down and clicking on the names and then Click < Add



Pro-Tip: Use Ctrl + F on the keyboard to search and find the name of the individual and save time



10. When finished, Select File > Save and Close New Participant



11. The Service Provider is able to view all scheduled/announced appointments on the **Providers > Appointments tab** by managing the view via the View Style filter. *NOTE: The Residential Monitor (Region QA Workstream worker)will be able to view the announced or unannounced appointments*



As Needed: Reschedule Site Visit Appointment



If the site visit was scheduled and needs to be done on a different date/time, the Residential Monitor (Region QA Workstream worker) will need to reschedule the existing appointment. This will ensure the appointment information is accurate for reporting.

1. Set "Role" = Region QA Workstream Worker then click Go.

	\
Role	
Region QA Workstream Worker	GO GO

2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Opd iConnect			Welc 6/20/2
File		<u> </u>	
	Quick Search		$\overline{}$
	A Test Provider X Providers	Provider Name	GO
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS	SCHEDULER
-Filters			

3. The Provider's record will display. Navigate to the **Providers > Appointments** tab.

	MY DASHBOARD CONSUMERS PROVIDERS REPORTS																
Tes	Test Provider (21347)																
			Workers	Services	Provider ID Numi	bers 0	Contracts	Beds	Linked Provide	ers C	Conditions	Service Area	Admin Ac	ction Facility Managemen	nt		
			Providers	Divisions	EVV Activities	Forms	Enrollr	ments A	Authorizations	Notes	Credent	als EVV So	heduling	CAP Appointments			
• •	View Style Originality Corrections Corrections																
+	•																
		Appointment Date -		Start	Time		End	Time			Туре			Subject	at and a state of the state of		Status
	Ð	09/14/2023	2:00:	00 PM		3:00:00	PM		Site V	fisit			Descrip	tion of Site Visit		Scheduled	

4. Select the appointment record that needs to be updated via the hyperlink in the list view

A Test	A Test Provider (1830)											
	Workers Services Provider ID Numbers Contracts Beds Linked Provides Conditions Service Area Admin.Actions											
		Providers Divisions	EVV Activities For	ns Enrollments	Authorizations	Notes Creder	tials EVV Sch	eduling CAP	Appointments			
View List We 4 Ap	View Style Original EVV Autries Pains Erounienis AutoLeadins Nois Celevinies EVV Schedung Cor Appannens List View Monthly View Appointment Date 4Appointments record(s) returned - now viewing 1 through 4											
	Annointment Date -	Start Time	End	Time	Type	X			Subject		Status	
	06/01/2022	3:00:00 PM	4:00:00 PM		Site Visit	Appointment	Scheduled for mo	nthly site visit			Scheduled	
Ŧ	01/20/2022	5:00:00 PM	6:00:00 PM		Site Visit	Monthly visit					Scheduled	
۲	06/02/2020	10:20:00 AM	10:50:00 PM		General	test					Scheduled	
÷	07/06/2018	3:15:00 PM	3:45:00 PM		Site Visit	Site Visit Lice	nsure Renewal				Scheduled	

- 5. Update the following field on the Appointment Details page
 - a. "Status" = Update to Rescheduled

		A Test Provider Appointm Last Updated by mreed@apdcares.org at 6/9/2022 5:14:37 PM	ent
Appointment	Appointments		
Participants List	Division	APD •	
	Appointment Date *	01/20/2022	
	Start Time	05 V 00 V PM V	
New Participant	Appointment End Date	01/20/2022	
	End Time	06 v 00 v PM v	
	Type *	Site Visit 🗸	
	Subject	Monthly visit	
	Status *	Rescheduled V	

6. When finished select File > Save Appointment



7. A prompt will appear that asks, "Do you want to reschedule this appointment?"



8. Click OK to reschedule the appointment. The appointment page opens, showing some data from the previous appointment.

9. Update the Appointment date and time information for the new appointment.

File		
Appointment	Appointments	
Participants List	Division	APD 🗸
	Appointment Date *	08/24/2023 07/19/2023
	Start Time	03 🗸 00 🗸 PM 🗸
New Participant	Appointment End Date	08/24/2023 07/19/2023
	End Time	04 🗸 00 🗸 PM 🗸
	Type *	Site Visit 🗸
	Subject	Site Visit for Service Level Designation Had to reschedule due to conflict with appointment time
	Status *	Scheduled V

10. Update the status from Pending to Scheduled, if appropriate.

- 11. Click **File > Save Appointment**. Both the original and reschedule appointments are listed in the Appointments tab detail view.
- 12. The rescheduled appointments detail page will now show the date of the original appointment next to the new Appointment Date and Appointment End date fields.

Qpd iConnect		A Test Provider Last Updated by mreed@apdcares.org at 6/23/2022 4:20:58 PM
File		
Appointment	Appointments	
Participants List	Division	APD V
	Appointment Date *	06/24/2022
	Start Time	02 v 00 v PM v
New Participant	Appointment End Date	06/24/2022
	End Time	03 v 15 v PM v
	Type *	Site Visit 🗸
	Subject	had to reschedule to to conflict with appointment time
	Status *	Pending V

Complete Site Visit



At the Residential Monitor's (Region QA Workstream worker) discretion, they can either enter the site visit information on their device onsite or print the Monthly Monitoring Forms prior to the site visit. The Service Provider will need to sign the hard copy signature page on the Monthly Monitoring form.

Complete Appointment



The Residential Monitor (Region QA Workstream worker) will update the appointment in APD iConnect after the site visit is completed.

1. Set "Role" = Region QA Workstream Worker then click Go.



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Opd iConnect		Welc 6/20/
File		
	Quick Search	
	A Test Provider X Providers	Provider Name
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS SCHEDULER
Filters		

3. The Provider's record will display. Navigate to the **Providers > Appointments** tab.

	MY DASHBOARD CONSUMERS PROVIDERS REPORTS												
Test	Test Priviler (15137)												
			Workers Services	Provider ID Numbe	rs Contra	racts Beds	Linked Provide	rs Con	ditions Ser	rvice Area	Admin Action	Facility Management	
			Providers Divisions	EVV Activities	Forms E	Enrollments	Authorizations	Notes	Credentials	EVV Scher	duling CAP	Appointments	
♥ie ● L ○ v	Wew Style Filters & Lit View O Bally View Yew D Daily View Saarch												
71	7 Providers Appointments record(s) returned - now viewing 1 through 7												
+		Appointment Date -	Start	Time		End Time			Type			Subject	Status
8	9	09/14/2023	2:00:00 PM	3	8:00:00 PM		Site V	sit			Description o	f Site Visit	Scheduled

4. Select the appointment record that needs to be updated via the hyperlink in the list view

A Tes	A Test Provider (18830)										
		Workers Services	Provider ID Numbers	er ID Numbers Contracts Beds		rs Conditions	Conditions Service Area				
		Providers Divisions	EVV Activities For	ms Enrollment	s Authorizations	Notes Crede	ntials EVV Sd	neduling CAP	Appointments		
Vier Lis Wi	Wew Style Or Filters Lit View Daily View Westly View Daily View 4 Appointments record(s) returned - now viewing 1 through 4										
<u> </u>		A		*	~	X					
	Appointment Date -	Start Time	End	Time	Type				Subject		Status
	06/01/2022	3:00:00 PM	4:00:00 PM		Site Visit	Appointment	Scheduled for m	onthly site visit			Scheduled
Ŧ	01/20/2022	5:00:00 PM	6:00:00 PM		Site Visit	Monthly visit	Monthly visit				Scheduled
÷	⊕ 06/02/2020 10:20:00 AM				General	ral test					Scheduled
Ŧ	07/06/2018	3:15:00 PM	3:45:00 PM		Site Visit	Site Visit Lice	ensure Renewal				Scheduled

- 5. Update the following field on the Appointment Details page
 - a. "Status" =
 - Update to Completed if the site visit was completed.
 - Update to Cancelled if the site visit was cancelled but not rescheduled.
 - Update to No Show if the Residential Monitor attempted to make the site visit but the contact person was not available. A new site visit will need to be scheduled.

opi topo	onnect	La	Test Provider st Updated by shelia.mott@apdcares.org at 5/2/2023 1:41:36 PM	Appointment
File				
Appointment	Appointments			
Participants List	Division	APD 🗸		
	Appointment Date *	06/05/2023		
New Participant	Start Time	01 ~ 00 ~ PM ~		
	Appointment End Date	06/05/2023		
	End Time	03 ~ 00 ~ PM ~		
	Туре *	Site Visit 🗸		
	Subject			1.
	Status *	Scheduled V		
		Canceled Completed No Show Pending Scheduled Rescheduled		

6. When finished select File > Save Appointment





7. From the File menu, select Close Appointment.

Complete Residential Monitoring Checklist



The Residential Monitor (Region QA Workstream worker) will document the Monthly Monitoring form in iConnect.

1. Set "Role" = Region QA Workstream Worker then click **Go.**



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Q ^{CD} iConnect					Wek 6/20/
File			```		
	Quick Search				
	A Test Provider X	Providers	Provider Nam	ne 🗸	GO
			1	1	
	MY DASHBOARD CONSUMER	RS PROVIDERS IN	NCIDENTS CL/	AIMS SCHEDULER	
Filters					

3. The Provider's record will display. Navigate to the Providers > Forms tab



4. Click File > Add Forms



5. Select "Please Select Type" as "Residential Monitoring Checklist" from the drop-down list

Please Select Type: Residential Monitoring Checklist										
Provider Assessment										
Division *	APD V	Worker *	Reed, Monica							
Review*	Monthly V	Status *	Draft							
Review Date *	08/19/2019	Approved By								
Approved Date										

- 6. Update the following Header fields:
 - a. "Division" = APD
 - b. "Review" = Monthly
 - c. "Status" = Draft

Message from webpage								
?	Saving this record with this Status will allow required fields designated with a red asterisk except system-required fields to remain incomplete upon save. Do you want to continue?							
	OK Cancel							

Note: When updating to Draft status, click OK on the popup message box

- 7. Complete all fields on the Residential Monitoring Checklist Form.
 - a. If violations are identified, save the form in Pending status.
 - b. If violations are NOT identified, save the form in Complete status.
- 8. When finished, click File > Save and Close Forms.



Site Visit Note



Upon returning to the office, the Residential Monitor (Region QA Workstream worker) will then complete the online form in APD iConnect (if applicable) and scan an electronic copy of the Service Provider signed signature page to their device and attach it to a note.

1. Set "Role" = Region QA Workstream Worker then click **Go.**



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

opd iConnect		Welc 6/20/2
File		
	Quick Search	
	A Test Provider X Providers	Provider Name GO
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS SCHEDULER
Filters		

3. Navigate to the Providers > Notes tab

File Reports										
	Quick S	iearch								
	1		Providers				~	Provider Name		
	MY DASH	HBOARD	CONSUM	ERS P	ROVIDERS		NCIDENTS	0	CLAIMS	SCHE
					\mathbf{N}					
A TEST Provider (10002)						<hr/>				
	Workers	Services	Provider I	D Numbers	Contracts	Beck	Linked P	roviders	Aliases	Conditions
	Providers	Divisions	Forms	Enrollment	s Authoriza	ations	Notes	Credentials	EVV 8	Scheduling
Note Type Equal To Note Date +		~	AND 🗸	×						
			Search	Reset						

4. Click File > Add Notes



- 5. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID if applicable
 - c. "Note Type" = Monthly Monitoring
 - d. "Note Subtype" = Facility Site Visit
 - e. "Description" = Facility Site Visit
 - f. "Note" = Enter notes such as "signature page added"
 - g. "Status" = Complete
 - h. Click "Add Attachment" and search for the copy of the signed signature page on the user's device. Click Upload
 - i. Click the ellipsis on the "Add Note Recipient" to add the *Supervisor* as the Note Recipient
 - j. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note
 - k. Click the ellipsis on the "Add Note Recipient" to add an additional recipient *Service Provider*
 - I. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

Notes Details							
Division *			APD 🗸				
Note By *			Reed, Monica		~		
Note Date *			08/23/2023				
Associated Form ID#			352				
Note Type *			Monthly Monit	toring 🗸 *			
Note Sub-Type			Facility Site V	isit	✔ *		
Description			Facility Site Vis	sit		1.	
Note			B <i>I</i> <u>U</u> Signature Pa	16px • A • nge added			
Status *			Complete 🗸				
Date Completed			08/23/2023				
Attachments							
Add Attachment							
Document				Description			
Signature Page							
Note Recipients	N						
Add Note Recipient:	63				Clear		
Name		Date Sent			Date Read		Status
Reed, Monica		8/23/2023					Unread

6. When finished click File > Save and Close Notes



7.

Supervisor Review and Approval



The QA Workstream Lead will receive notification of the note via My Dashboard. If there are no violations, they will review all monitoring tools and documentation and if approved will create a new note. If no changes are necessary, they will then review the Residential Monitoring Checklist form. If violations have been identified, Proceed to <u>Violations Found</u> - <u>Add CAP</u>. If changes are needed, proceed to <u>Further Documentation Required</u>

1. Set "Role" = Region QA Workstream Lead OR Worker then click Go



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

oped iConnect		Wel 620
File		
	Quick Search	
	A Test Provider X Providers	Provider Name GO
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS SCHEDULER
S Filters		

3. The Provider's record will display. Navigate to the Providers > Notes tab

File Reports									
	Quick S	earch							
	1			Providers		~	Provider N	ame	
	MY DASH	BOARD	CONSUM	ERS PF	OVIDERS	INCIDENT	rs c	LAIMS	SCHE
					`				
A TEET Drawiday (40003)									
A TEST Provider (10002)					``	<hr/>			
	Workers	Services	Provider II	D Numbers	Contracts	Bea Linker	I Providers	Aliases	Conditions
	Providers	Divisions	Forms	Enrollments	Authoriza	tions Notes	Credentials	EVV So	heduling
Sector Secto									
Note Type V Equal To V		~	AND 🗸	×					
Note Date +									
			Search	Reset					

4. Click File > Add Notes

File	Reports
Add Ne	w Provider Search
Add No	tes _
Print	
	<u> </u>

- 5. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#"- Enter Form ID# if applicable
 - c. "Note Type" = Monthly Monitoring
 - d. "Note Subtype" = Supervisor Approval
 - e. "Description" = Supervisor Approval
 - f. "Note" = Enter Supervisor approval notes
 - g. "Status" = Complete
 - h. Click the ellipsis on the "Add Note Recipient" to add the *Residential Monitor (Region QA Workstream Worker)* as the Note Recipient
 - i. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note
 - j. Click the ellipsis on the "Add Note Recipient" to add an additional recipient *Service Provider*
 - k. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

Notes Details	
Division *	APD -
Note By *	Reed, Monica 🗸
Note Date *	09/21/2023
Associated Form ID#	352
Note Type *	Monthly Monitoring
Note Sub-Type	Supervisor Approval 🗸
Description	Supervisor Approval
Note	B I U 16px - A - Enter Supervisor Approval Notes
Status *	Complete 🗸
Date Completed	09/21/2023
Attachments Add Attachment	
Document	Description
There are no attachments to display	\ \
Note Recipients	X
Add Note Recipient:	Clear

6. When finished click File > Save and Close Notes



7. If no violations are found, the Supervisor will also review the Residential Monitoring Checklist.

8. Navigate to the **Provider > Forms** tab.

-				
opd iConnect	t.			
File Word Merge				
		Quick Search	Providers	V
		MY DASHBOARD	CONSUMERS PROVIDE	
A TEST Provider (10002)				
		Workers Services Providers Divisions	Provider ID Numbers Contra Forms Enrollments Au	acts Beds Linked thorizations Notes
Filters Equal To Status Image: Constraint of the state of the st	Draft	Search Repet		
31 Forms record(s) returned -	now viewing 1 through 15			
Division		Form Name		
APD	Group Home Facility Checklist			
APD	Group Home Personnel Record Review			
APD	Provider Enrollment Application			

9. Select the **Residential Monitoring Checklist** form in Complete status. The form opens. Review the content of the form.

10. From the File menu, select Close Forms.





If no violations are found, no additional steps are needed.

As Needed: Violations Found Add CAP



If there are not met violations, the Residential Monitor (Region QA Workstream worker) will want to keep the Residential Monitoring Checklist open in order to view those not met items. Each one will need to be added as a single CAP item record on the newly created CAP.

1. Set "Role" = Region QA Workstream Worker then click Go.

	\
Role	
Region QA Workstream Worker	GO GO

2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Opd iConnect					Welc 6/200
File				>	
	Quick Search				$\overline{}$
	A Test Provider X	Providers	V Prov	ider Name	GO
	MY DASHEOARD CONSUM	RS PROVIDERS	INCIDENTS	CLAIMS	SCHEDULER
Filters		1			

3. The Provider's record will display. Navigate to the Providers > CAP tab

QC iConnect													
File													
	Quick S	earch											
				Providers			~	Provider 1	lame		~	GO	\odot
	MY DASH	IBOARD	CONSUME	RS PR	ROVIDERS	IN	CIDENT	6 (CLAIMS	SCH	EDULER	E 1	JTILITI
A TEST Provider (10002)													
	Workers	Services	Provider ID	Numbers	Contracts	Beds	Linked	Providers	Aliases	Conditions	Sen	ice Area	Adm
	Providers	Divisions	Forms	Enrollments	Authoriza	tions	Notes	Credentials	EVV S	Scheduling	CAP	Appointm	ients
CAPID + Starch Reset													

4. Select File > Add CAP

File		
Add New Prov	vider Search	C
Add CAP 🚤		
Print		
	0	

- 5. Update the following fields:
 - a. "CAP Type" = Notice of Non-Compliance
 - b. "Date of CAP" = Enter Date
 - c. "Associated Form ID#" = Enter Form ID if applicable
 - d. "Date Provider Notified" = Enter Date
 - e. "CAP Due Date" = Enter Date as 15 calendar days after the Date of CAP
 - f. "Status" = Defaults to Pending
 - g. "Comments" = Enter if applicable
 - h. "Licensing Worker" = Click the ellipsis to add the appropriate worker

CAP	
CAP ID	
CAP Type	Notice of Non-Compliance 🗸
Date of CAP	08/01/2023
Associated Form ID#	1256
Date Provider Notified	08/01/2023
CAP Due Date	08/15/2023
Status	Pending ~
Comments	B Z U 16px • A •
Date Submitted by Provider	
Date Verified Complete by APD Staff	
Licensing Worker	Clear
QA Workstream Lead	Clear

6. When finished, select File > Save CAP



7. Click "Items" on the left-hand navigation menu and then File > Add Item



- 8. Update the following fields:
 - a. "Action Type" = Licensing
 - b. "Type of Site Visit" = Residential Monitoring
 - c. "Discovery Source" = Monitoring Visit
 - d. "Remediation Type" = Licensing
 - e. "Employee Involved" = Enter Name if applicable
 - f. "Standard Not Met Description" = Click the ellipsis to add the appropriate Standard Not Met
 - g. "Comments" = Enter comments that describe the violations, because this information populates the NNC.
 - h. "Item Status" = Defaults to Pending leave as Pending until item has been completed or another status is applicable
 - i. "Due Date" = Enter Date as 15 calendar days after the Date of CAP
 - j. "Provider Worker" = Click the ellipsis to add the worker
 - k. "Corrective Action Required" = Enter Information
 - I. "Evidence of Completion" = will be completed by the Residential Monitor once the Service Provider has entered the corrective action taken

File	
Summary	
Item ID	
Item Number	
Action Type	Licensing V
Type of Site Visit *	Residential Monitoring 🗸
Discovery Source	Monitoring Visit 🗸
Remediation Type	Licensing V
Employee Involved	
Standard Not Met Description	ADMINISTRATION. Each foster care facility shall designate a Clear
Comments	
Item Status	Pending
Due Date	09/30/2023
Provider Worker	Reed, Monica Clear Details
Corrective Action Required	Corrective Action Required
Evidence of Completion	e e e e e e e e e e e e e e e e e e e



If additional items need to be added, then repeat steps 7 and 8 as necessary by selecting **File > Save and Add Another Item** for each new item.

9. When finished, select File > Save and Close Item



As Needed: Generate NNC



If there are violations, the Residential Monitor will generate the Notice of Non-Compliance report.

If a PAARF is needed then proceed to Chapter 13 for the PAARF process.

1. Set "Role" = Region QA Workstream Worker/Lead then click Go.



2. Navigate to the **Providers > CAP** tab

Q ²⁰ iConnect													
File													
	Quick S	earch		Providers			•	Provider N	ame		V	GO	0
	MY DASH	BOARD	CONSUM	ERS	ROVIDERS	IN	CIDENTS	; c	CLAIMS	SCH	EDULER	2	UTILI
A TEST Provider (10002)													
	Workers	Services	Provider I	D Numbers	Contracts	Beds	Linked	Providers	Aliases	Conditions	Serv	ice Area	Adr
	Providers	Divisions	Forms	Enrollments	Authoriza	ations	Notes	Credentials	EWS	cheduling	CAP	Appoint	nents
CAPID + Scarch Reset													

3. Select the previously created new CAP record via the hyperlink for that record

Test Provider (21347)	Test Provider (21347)									
		Workers	Services P	Provider ID Numb	ers Co	ontracts Beds	Linked Providers	s Conditions	Service Area Admin	Actions
		Providers	Divisions	EVV Activities	Forms	Enrollments	Authorizations	Notes Credentia	s EVV Scheduling	САР
Filters CAP ID Search 9 Providers CAP record(s) return	Reset	gh 9								
CAP QIO Report ID Number	САР Туре	Date Provider Notified	CAP Due	e Date Stat	us	Number of Alerts	Number of Items	Licensing Worker	QA Workstrear Worker	n
122 N	lotice of Non- Compliance	09/01/2023	09/30/202	23 Pending			1	Reed, Monica		

4. Select Reports > NNC from the CAP Details page

0	od iConn	nect		
File	Reports	/		
САР	NNC	Open NNC		
Items		Сяг то САР Туре	 122 Notice of Non-Compliance	~

5. The NNC Report screen will display. Enter the CAP ID and click View Report

Cap ID 106		
4 4 1 of 1 ▷ ▷ 4	Find Next 🛛 😽 🔹 🍥	

State of Florida

Agency for Persons with Disabilities

Issued To(Name of Licensee):	OME	Lice	ise Number:	
Address: 640 VILLACHANDE AVE 8		8	Facility Name:	IOUNE GROUP HOME
City: 5T METERSBURG	County: PINELLAS	State FL	: Zip:	Telephone:
APD Representative:	7.		Title:	
Sections 120.695, Florida Statues allow for requirement of corrective action without p	r certain minor offenses to penalty.	be add	ressed by the issuance	of a Notice of Noncompliance and the
	VIO	LAT	ION	
It appears that on 07/10/2023 , you were	in violation of the followir	ıg statut	e(s) or rule(s):	

2.003(c) Decises and a winy emproyees must permit any regime yad to designate again to the state of the role of the state of the sta

6. Save the NNC Report to the user's device so it can be attached to the Supervisor Review note in the next section.

As Needed: Supervisor Review



The Residential Monitor will send a note to the Supervisor to advise them to do a review of the CAP record, NNC and any other documentation and provide approval. 1. Set "Role" = Region QA Workstream Worker then click Go.



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

opd iConnect		We 6/21
File		
	Quick Search	
	A Test Provider X Providers	Provider Name GO
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS SCHEDULER
Filters		

3. Navigate to the Providers > Notes tab

File Reports										
	Quick S	iearch								
	1			Providen	8		~	Provider N	lame	
	MY DASH	IBOARD	CONSUM	ERS F	ROVIDERS	IN	CIDENTS	0	CLAIMS	SCH
					`					
A TEST Provider (10002)						、				
	Workers	Services	Provider II	D Numbers	Contracts	Bea	Linked P	roviders	Aliases	Conditions
	Providers	Divisions	Forms	Enrollment	s Authoriza	ations	Notes	Credentials	EVV	Scheduling
Note Type Equal To Note Date +		~		×						
		1	Search	Reset						

4. Click File > Add Notes



- 5. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID# if applicable
 - c. "Note Type" = Monthly Monitoring/Supervisor Review
 - d. "Description" = Monthly Monitoring/Supervisor Review
 - e. "Note" = Advise Supervisor to review CAP, NNC and other documents

- f. "Status" = Pending
- g. Click "Add Attachment" and search for the copy of the NNC report on the user's device. Click Upload
- h. Click the ellipsis on the "Add Note Recipient" to add the *Supervisor* as the Note Recipient
- i. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

Notes Details	
Division *	APD V
Note By *	Reed, Monica 🗸
Note Date *	09/22/2023
Associated Form ID#	
Note Type *	Monthly Monitoring/Supervisor Review
Note Sub-Type	*
Description	Monthly Monitoring/Supervisor Review
Note	B Z U 16px - A - Enter Notes for Supervisor to Review CAP, NNC and any other documentation
Status *	Pending V
Date Completed	
Attachments	
Add Attachment	
Document	Description
There are no attachments to display	
Note Recipients	
Add Note Recipient:	Clear

6. When finished click File > Save and Close Notes



As Needed: Supervisor Approval



The Supervisor will get notification of the note via their My Dashboard. If no changes are necessary, they will then review the Residential Monitoring form, marking it complete. If there were violations found, the supervisor will also review the CAP record, and the NNC. If all monitoring documentation meets expectations, the supervisor will document their approval by updating the existing note. If not approved, proceed to <u>Further</u> <u>Documentation Required</u> 1. Set "Role" = Region QA Workstream Lead or Worker then click **Go.**



2. Navigate to the **My Dashboard > Providers > Notes > Pending** and click the hyperlink for the Pending notes.



3. Select the **Note Type = Monthly Monitoring/Supervisor Review** and select the pending record via the hyperlink.

Sta	illers tus V Equal To V Pending teTypeV + 9 Wr Dashboard Notes record(s) returnedorg	AND X Sauch Reset Junior 1 Struck 15				
	Provider	NoteType	Note Date -	Description	Author	Status
	Test Provider	Monthly Monitoring/Supervisor Review	09/22/2023	Monthly Monitoring/Supervisor Review	Reed, Monica	Pending

- If this is a Supervisor Approval that required Further Documentation and it was provided but still does not meet requirements, repeat the <u>Further</u> <u>Documentation Required</u> section.
- 5. If this is a Supervisor Approval that does not require further documentation or further documentation was required and has been received, in the existing Note record, update the following fields:
 - a. "Associated Form ID#" = Enter Form ID# if applicable
 - b. "Note Type" = Update to Monthly Monitoring/Supervisor Approval
 - c. "Note Subtype" =
 - i. If this is a Supervisor Approval and Further Documentation is NOT required, leave this field blank.

 ii. If this is a Supervisor Approval that required Further Documentation which has now been provided, update to *Further Documentation Provided*



- d. "Description" = enter a description if applicable
- e. "Note" = Enter Notes
- f. "Status" = Update to Complete
- g. Click the ellipsis on the "Add Note Recipient" to add the *Region QA Worker/Residential Monitor* as the Note Recipient
- h. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note.

Notes Details	
Division *	APD V
Note By *	Reed, Monica
Note Date *	09/22/2023
Associated Form ID#	
Note Type *	Monthly Monitoring/Supervisor Approval
Note Sub-Type	▼*
Description	Monthly Monitoring/Supervisor Approval
Note	On 9/22/2023 at 3:53 PM, Monica Reed Wrote: Enter Notes for Supervisor to Review CAP, NNC and any other documentation
Status *	Complete V
Date Completed	09/22/2023
Attachments	
Add Attachment	
Document	Description
There are no attachments to display	\mathbf{X}
Note Recipients	
Add Note Recipient:	Clear

6. When finished click File > Save and Close Notes



7. Select File > Close Notes



8. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

o <mark>ce iConnect</mark>						Wek 6/20/
File					/	
	Quick Search					$\overline{}$
	A Test Provider	X	Providers	~	Provider Name	✓ G0
	MY DASHBOARD	CONSUMER	S PROVIDERS	INCIDENTS	CLAIMS	SCHEDULER
O-Filters		/	*			

9. Navigate to the Providers > Forms tab and enter the Search criteria as Form Name = Residential Monitoring Checklist then Click Search and select the form via the hyperlink on the record

		MY DASH	IBOARD	CONSUME	ERS P	ROVIDERS	INC
A TEST Provider (10002)			$\mathbf{\mathbf{N}}$				
		Workers	Services	Provider II	D Numbers	Contracts	Beds
		Providers	Divisions	Forms	Enrollment	s Authoriz	ations N
-Filters	1						
Form Name Equal To	✓ Reside	ential Monitor	ing Checklis	t	\checkmark	AND 🗸	×
Division 🖌 +							
						Search	Reset
5 Forms record(s) returned -	now viewing 1 thro	ough 5		/			
Division			For	m Name			
APD	Residential Monito	oring Checklis	st				

10. Update the Status = Complete and Click OK on the popup message box

Provider Assessment			
Division *	APD V	Worker *	Reed, Monica
Review *	Monthly	Status *	Complete
Review Date *	03/22/2018	Approved By	Reed, Monica
Approved Date	08/20/2019		



11. When finished select File > Save and Close Forms



As Needed: Service Provider NNC Notification



The Residential Monitor (Region QA Workstream worker) will get notification of the Supervisor Approval via the note on their My Dashboard. They will attach the NNC to a new note to notify the Service Provider.

1. Set "Role" = Region QA Workstream Worker then click Go



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Q <mark>cd</mark> iConnect					Welc 6/20/2
File				/	
	Quick Search				
	A Test Provider	X Providers	v	Provider Name	GO
	MY DASHBOARD	CONSUMERS PROVIDERS	INCIDENTS	CLAIMS	SCHEDULER
O-Filters		1			

3. The Provider's record will display. Navigate to the Providers > Notes tab

File Reports										
	Quick S	earch								
	1			Providers			~	Provider N	lame	
	MY DASH	IBOARD	CONSUME	ERS PF	ROVIDERS	I	CIDENTS	3 0	CLAIMS	SCHE
					`					
A TEST Provider (10002)						、				
	Workers	Services	Provider II	O Numbers	Contracts	Bed	Linked	Providers	Aliases	Conditions
	Providers	Divisions	Forms	Enroliments	Authoriza	tions	Notes	Credentials	EWS	Scheduling
Filters Feuel To										
		•								
Note Date +										
			Search	Reset						

4. Click File > Add Notes

File	Reports
Add Ne	w Provider Search
Add No	tes _
Print	

- 5. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID# if applicable
 - c. "Note Type" = Monthly Monitoring
 - d. "Note Subtype" = NNC Notification
 - e. "Description" = NNC Notification
 - f. "Note" = Enter notes
 - g. "Status" = Complete
 - h. Click "Add Attachment" and search for the copy of the *Notice of Non-Compliance* report on the user's device. Click Upload
 - i. Click the ellipsis on the "Add Note Recipient" to add the *Service Provider* as the Note Recipient
 - j. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

opd iConnect			
File Tools			
Notes Details			
Division *		APD 🗸	
Note By *		Reed, Monica	~
Note Date *		08/23/2023	
Associated Form ID#			
Note Type *		Monthly Monitoring *	
Note Sub-Type		NNC Notification	*
Description		NNC Notification	le
Note			
Status *		Complete ~	
Date Completed		08/23/2023	
Attachments			
Add Attachment			\triangleright
Document	ſ	Description	
NNC		、	
			λ.
Note Recipients			٩
Add Note Recipient:			Clear
Name	Date Sent		Date Read
Reed, Monica	8/23/2023		

6. When finished click **File > Save and Close Notes**



7. Upon saving the note, multiple Workflow Wizards are triggered with reminder ticklers.

File
Workflow Wizard
Review Provider Record for Corrective Action Plan - Monthly Monitoring
Workflow Wizard
Reassign this tickler to the licensee/designee Corrective Action Plan is due in 5 days

- 8. Tickler "Reassign this tickler to the licensee/designee. Corrective Action Plan is due in 5 days" From the tickler flyout menu, the Residential Monitor should reassign this tickler to the licensee/designee.
- 9. Tickler "Review Provider Record for Corrective Action Plan Monthly Monitoring" This is a reminder for the Residential Monitor to check the provider has submitted their CAP.
 - a. Due on the **15th** calendar day from the "Monthly Monitoring/NNC Notification" Complete note

As Needed: Submit CAP



The Service Provider will receive the NNC Notification note on My Dashboard. They will then update the CAP item(s) by describing the action taken to correct the identified site visit violations. When finished the Service Provider will send a note to advise of the revisions and attach any supporting documents.

1. Set "Role" = Service Provider then click Go



2. The Provider's record will display. Navigate to the **Providers > CAP** tab

opd iConnect													
File													
	Quick S	earch		Question				-					
				Providen			•	Provider N	lame			GO	⊘
	MY DASH	BOARD	CONSUM	ERS P	ROVIDERS	IN	CIDENT	s (CLAIMS	SCH	EDULER	U	тіціт
A TEST Provider (10002)													
	Workers	Services	Provider I	D Numbers	Contracts	Beds	Linked	Providers	Allases	Conditions	Servic	e Area	Adn
	Providers	Divisions	Forms	Enrollment	s Authoriza	ations	Notes	Credentials	EWS	cheduling	CAP	Appointme	ents
CAPID Search Reset													

3. Select the appropriate CAP record via the hyperlink

Tes	Test Provider (21347)														
				Workers	Services	Provider ID Numbe	rs Cont	tracts Bec	Is Linked Provid	lers C	Conditions S	ervice Area	Admin A	ctions	
				Providers	Divisions	EVV Activities	Forms	Enrollments	Authorizations	Notes	Credentials	EVV Sd	eduling	САР	App
	lters														
CAP	P ID	~	• +												
		Search	Reset												
-8	Providers	s CAP record(s) returned	d - now viewing 1 through 8-												
		\													
	CAPID	QIO Report Number	CAP Type	Date Provider Notified -	CAP Due D	nte Status	Nun	nber of Alert	s Number of It	ems	Licensing Wo	rker QA	Workstrea	am Wor	ker
	121		Notice of Non-Compliance	08/01/2023	08/15/2023	Pending			1	F	Reed, Monica				
	113		Plan of Remediation	07/20/2023		Pending			1			Reed	Monica		
	114		Plan of Remediation	07/03/2023	08/03/2023	Pending			0			Reed	Monica		

- File Reports CAP CAP CAP ID 86 Items Notice of Non-Compliance 🗸 САР Туре 04/01/2023 Date of CAP Associated Form ID# . Date Provider Notified 04/03/2023 CAP Due Date 05/12/2023 Status Pending ~ **В** *I* <u>U</u> 16рх • **A** • Comments Date Submitted by Provider Date Verified Complete by APD Staff Licensing Worker Reed, Monica
- 4. Click the Items link on the left-hand navigation menu

5. Select the Item to update via the hyperlink in the list view grid



- 6. In the Item Detail, update the following fields:
 - a. "Correction Action Required" = Enter steps taken to address the deficiency, then Click **Append Text to Note**

File		
Item	Summary	
	Item ID	138
	Item Number	
	Action Type	Licensing V
	Type of Site Visit *	Residential Monitoring 🐱
	Discovery Source	Monitoring Visit 🗸
	Remediation Type	Licensing 🗸
	Employee Involved	
	Standard Not Met Description	ADMINISTRATION. Each foster care facility shall designate a Clear
	Comments	New Test Append Test to Note
	Item Status	Pending 🗸
	Due Date	09/30/2023
	Provider Worker	Reed, Monica Clear Details
	Connection Action Required	Corrective Action Required
	Evidence of Completion	New Text Append Text to Note

7. When finished, Click File > Save and Close Item





Repeat steps 4 – 7 for each item that has had deficiencies addressed by the Service Provider. Leave all Item statuses in "Pending"

8. Click File > Close Items



9. Navigate to the Providers > Notes tab

File Reports										
	Quick S	iearch								
	1			Providers			~	Provider N	Name	
	MY DASH	IBOARD	CONSUME	RS P	ROVIDERS	IN	NCIDENTS		CLAIMS	SCH
					\mathbf{X}					
A TEST Provider (10002)										
	Workers	Services	Provider I	O Numbers	Contracts	Bed	Linked F	Providers	Aliases	Conditions
	Providers	Divisions	Forms	Enrollments	a Authoriz	ations	Notes	Credentials	EWS	Scheduling
Filters Note Type Equal To Note Date +		v *	AND 🗸	×						
		\$	Search	Reset						

10. Click File > Add Notes



- 11. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Note Type" = Monthly Monitoring
 - c. "Note Subtype" = CAP Submitted
 - d. "Description" = CAP Submitted
 - e. "Note" = Enter notes for details of supporting documentation
 - f. "Status" = Complete
 - g. Click "Add Attachment" and attach an individual copy of each Supporting Document on the user's device. Click Upload
 - h. Click the ellipsis on the "Add Note Recipient" to add the *Residential Monitor (Region QA Workstream Worker)* as the Note Recipient

i. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

Notes Details	
Division *	APD V
Note By *	Reed, Monica
Note Date *	09/23/2023
Note Type *	Monthly Monitoring 🗸
Note Sub-Type	CAP Submitted
Description	CAP Submitted
Note	B I U 16px • A • Details of Supporting documents
Status *	Complete 🗸
Date Completed	09/23/2023
Attachments	
Add Attachment	
Document	Description
There are no attachments to display	
Note Recipients	
Add Note Recipient:	Clear

12. When finished click File > Save and Close Notes



As Needed: CAP Accepted



The Residential Monitor will receive notification of the CAP Submitted note on My Dashboard. The Residential Monitor will review the CAP Items and all documentation to determine if the CAP is accepted. If all items are complete then proceed, otherwise, proceed to <u>CAP Rejected Note</u>. 1. Set "Role" = Region QA Workstream Worker then click Go.



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

opd iConnect			Wel 6/20
File			_
	Quick Search		$\overline{}$
	A Test Provider X Providers	Provider Name	GO
	MY DASHBOARD CONSUMERS PROVIDERS	INCIDENTS CLAIMS	SCHEDULER
Filters			

3. Navigate to the Providers > Notes tab



4. Click File > Add Notes



- 5. In the new Note record, update the following fields:
 - a. "Associated Form ID#" = Enter Form ID# if applicable
 - b. "Note Type" = Monthly Monitoring
 - c. "Note Subtype" = CAP Accepted
 - d. "Description" = CAP Accepted
 - e. "Note" = Enter Notes
 - f. "Status" = Complete

- g. Click the ellipsis on the "Add Note Recipient" to add the *Service Provider* as the Note Recipient
- h. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note.

Notes Details	
Division *	APD V
Note By *	Reed, Monica
Note Date *	09/23/2023
Associated Form ID#	759
Note Type *	Monthly Monitoring
Note Sub-Type	CAP Accepted
Description	CAP Accepted
Note	B Z U 16px - A - Enter Notes
Status *	Complete V
Date Completed	09/23/2023
Attachments Add Attachment	
Document	Description
There are no attachments to display	
Note Recipients	×
Add Note Recipient:	Clear

6. The Provider's record will display. Navigate to the Providers > CAP tab



7. Select the appropriate CAP record via the hyperlink

Test	Provide	er (21347)												
				Workers	Services	Provider ID Numb	ers Cor	ntracts Beds	Linked Provide	ers Co	nditions Serv	rice Area Adm	in Actions	
				Providers	s Divisions	EVV Activities	Forms	Enrollments	Authorizations	Notes	Credentials	EVV Schedulin	CAP	A
CAP	ters ID Providers	Search CAP record(s) returned	+ Reset I - now viewing 1 through 8											
	CAPID	QIO Report Number	CAP Type	Date Provider Notified	CAP Due Da	ate Status	Num	ber of Alerts	Number of Iter	ns Lie	censing Worke	r QA Works	ream Work	ker
8	6		Notice of Non-Compliance	04/03/2023		Pending			1	Ree	d, Monica			
8	7		ROM Letter		05/24/2023	Not Complian			2	Ree	d, Monica			

File Reports		
CAP	САР	
Items	CAPID	86
	САР Туре	Notice of Non-Compliance 🗸
	Date of CAP	04/01/2023
	Associated Form ID#	
	Date Provider Notified	04/03/2023
	CAP Due Date	05/12/2023
	Status	Pending ~
	Comments	Β Ι Π [16ρχ • Α •]
	Date Submitted by Provider	
	Date Verified Complete by APD Staff	
	Licensing Worker	Reed, Monica

8. Click the Items link on the left-hand navigation menu

9. Select an individual Item via the hyperlink in the list view grid

CAP	Filters Item Number S -2 Items record(s)	earch Reset returned - now vie	wing 1 through 2	,				
	Item Number	QIO Category	Remediation Type	Standard Not Met	Item Status	Due Date	Complete Date	Worker
			Licensing	1	Pending	02/23/2018		
			Lisensing		Danding			

- 10. Update the following fields on the Item Details page:
 - a. "Item Status" = Update to Complete
 - b. "Complete Date" = Enter Date
 - c. "Evidence of Completion" = Enter text and then click Append Text to Note

Summary	
Item ID	90
Item Number	
Action Type	Licensing 🗸
Type of Site Visit *	Residential Monitoring V
Discovery Source	Licensing Visit 🗸
Remediation Type	Licensing ~
Employee Involved	
Standard Not Met Description	
Comments	New Text Append Text to Note
Item Status	Complete
Complete Date *	08/30/2023
Due Date	
Provider Worker	Mott, Shelia Clear Details
Corrective Action Required	corrective action test On 4259023 at 304 PM, Shella Mott worke: 1 did fix it. On 4259023 at 314 PM, Shella Mott worke: Sen ode lated On 4269023 at 943 AM, Monica Reed worke: Corrective action New Text Append Text to Note
Evidence of Completion	evidence of completion test
	Annand Taxt to Note



Repeat steps 9 - 10 for each item that is complete in the CAP record.

11. When finished, Click File > Save and Close Item





If ALL items are complete for the CAP record, then proceed to close the CAP record.

NOTE: CAP record must remain in a Pending status until all items are completed or rejected.

12. Click CAP on the left-hand navigation menu



- 13. Update the following fields on the CAP Details Page:
 - a. "Status" = Update to Complete
 - b. "Date Submitted by Provider" = Enter CAP Submitted Note Date
 - c. "Date Verified Complete by APD Staff" = Enter Date

CAP			
CAP ID	86		
САР Туре	Notice of Non-Compliance 🗸		
Date of CAP	04/01/2023		
Associated Form ID#			
Date Provider Notified	04/03/2023		
CAP Due Date	05/12/2023		
Status	Complete 🗸		
Comments	B I <u>U</u> 16px • A •		
Date Submitted by Provider	08/29/2023		
Date Verified Complete by APD Staff	08/30/2023		
Licensing Worker	Reed, Monica	 Clear	Details
QA Workstream Lead		 Clear	

14. When finished, select File > Save and Close CAP



As Needed: Further Documentation Required



If further documentation is required, the Supervisor will update the existing Monthly Monitoring/Supervisor Review note and send it back to the Residential Monitor.

- 1. Set "Role" = Region QA Workstream Lead then click Go.
- Navigate to the My Dashboard > Providers > Notes > Pending and click the hyperlink for the Pending notes.



3. Select the **Note Type = Monthly Monitoring/Supervisor Review** and select the pending record via the hyperlink.



- 4. In the existing Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID# if applicable
 - c. "Note Type" = Monthly Monitoring/Supervisor Review
 - d. "Note Subtype" = Update to Further Documentation Required
 - e. "Description" = Update to Further Documentation Required
 - f. "Note" = Enter notes as to what documentation is needed. Select Append to Text.
 - g. "Status" = Leave as Pending
 - h. Click the ellipsis on the "Add Note Recipient" to add an additional recipient *Residential Monitor (Region QA Workstream Worker)*

Note	s
------	---

Notes Details			
Division *	APD 🗸		
Note By *	Reed, Monica		
Note Date *	10/18/2023		
Note Type *	Monthly Monitoring/Supervisor Rev	iew ✔*	
Note Sub-Type	Further Documentation Required	*	
Associated Form ID#	352		
Description	Further Documentation Required	11	
Note	New Text B I U 16px • A • Enter notes as to what documenta Append T	tion is needed ext to Note	
Status *	Pending 🗸		
Date Completed			
Attachments			
Add Attachment			
Document	Description	Category	Action
There are no attachments to display	١		
Note Recipients	\ \	•	
Add Note Decisient:		Char	

5. When finished click File > Save and Close Notes



As Needed: Requested Information



The Residential Monitor (Region QA Workstream worker) will receive notification of the Further Documentation Required Note and make the necessary corrections/revisions to the CAP items records. If applicable, regenerate the NNC and attach to existing pending note.

1. Set "Role" = QA Workstream Worker then click Go



2. Navigate to the **My Dashboard > Providers > Notes > Pending** and click the hyperlink for the Pending notes.



3. Select the **Note Type = Monthly Monitoring/Supervisor Review** and select the pending record via the hyperlink. Review the note for the requested updates from the Supervisor.

© Filters Status ♥ Equal To ♥ Pending NoteType ♥ +	V AND X Search Reset				
29 My Dashboard Notes record(s) returned - now	viewing 1 through 15				
Provider	NoteType	Note Date -	Description	Author	Status
Test Provider	Monthly Monitoring/Supervisor Review	09/22/2023	Monthly Monitoring/Supervisor Review	Reed, Monica	Pending

4. To update the items in the CAP, navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Q <mark>cd</mark> iConnect			Welc 6/200
File			
	Quick Search		
	A Test Provider X Providers	Provider Name	GO
	MY DASHBOARD CONSUMERS PROVID	DERS INCIDENTS CLAIMS	SCHEDULER
Filters			

5. The Provider's record will display. Navigate to the **Providers > CAP** tab

app iconnect													
File	-												
	Quick S	Search		Providers			V	Provider N	ame		V	GO	\odot
	MY DAS	HBOARD	CONSUME	RS PF	ROVIDERS	INC	IDENTS	c	LAIMS	SCH	EDULER		UTILITIE
A TEST Provider (10002)													
	Workers	Services	Provider ID	Numbers	Contracts	Beds	Linked Pr	oviders	Aliases	Conditions	Servi	ce Area	Admir
	Providers	Divisions	Forms	Enrollments	Authoriza	ions N	lotes C	redentials	EW S	cheduling	CAP	Appointm	aents
CAPID + Starth Rest													<

6. Select the appropriate CAP record via the hyperlink

			Workers	Services Pr	ovider ID Numbers	Contracts	Beds	Linked Provider	Conditions	Service Area	Admin Actio
			Providers	Divisions E	VV Activities Fo	rms Enrollm	ents /	Authorizations	Notes Crede	ntials EVV So	cheduling C
PID	Ý	+									
8 Providers	Search	Reset d - now viewing 1 through 8-									
3 Providers	GCAP record(s) returned	Reset d - now viewing 1 through 8- CAP Type	Date Provider Notified -	CAP Due Date	Status	Number of A	lerts	Number of Iten	s Licensin	J Worker QA	A Workstream
CAP ID	Search CAP record(s) returner	Reset d - now viewing 1 through 8 CAP Type Notice of Non-Compliance	Date Provider Notified 08/01/2023	CAP Due Date 08/15/2023	Status Pending	Number of A	lerts	Number of Iten	IS Licensing Reed, Mon) Worker QA	A Workstream
CAP ID 121 113	Search CAP record(s) returned QIO Report Number	Reset d - now viewing 1 through 8 CAP Type Notice of Non-Compliance Plan of Remediation	Date Provider Notified 08/01/2023 07/20/2023	CAP Due Date 08/15/2023	Pending Pending	Number of A	lerts	Number of Iten 1	IS Licensing Reed, Mon	y Worker QA ca Reec	A Workstream ' d, Monica

7. Click the Items link on the left-hand navigation menu

ile Reports					
p	CAP				
	CAP ID	123			
ns	САР Туре	Notice of Non-Compliance ~	9		
	Date of CAP	09/25/2023			
~	Associated Form ID#	502			
	Date Provider Notified	09/25/2023			
	CAP Due Date	10/10/2023			
	Status	Pending ~			
	Comments	B <i>I</i> <u>U</u> 16px • A •			Î
	Date Submitted by Provider				
	Date Verified Complete by APD Staff				
	Licensing Worker	Reed, Monica		Clear	Details

8. Select an Item via the hyperlink in the list view grid

File								
CAP	Filters Item Number S 2 Items record(s)	earch Reset	wing 1 through 2					
	Item Number	QIO Category	Remediation Type	Standard Not Met	Item Status	Due Date	Complete Date	Worker
			Licensing	1	Pending	02/23/2018		
			Licensing		Pending			

9. Enter the Corrective Action Required information and Click Append to Text to Note

File		
Item	Summary	
	Item ID	3
	Item Number	
	Action Type	Licensing V
	Discovery Source	Monitoring Visit V
	Remediation Type	Licensing V
	Employee Involved	
	Standard Not Met Description	1 Complete and signed Participant/Representative Agreemer Clear
	Comments	
	Item Status	Pending V
	Due Date	02/23/2018
	Complete Date	
	Worker	Clear
		The January 2019 support plan for Suzy Doe must be placed in her file.
		New Text
	Corrective Action Required	^
		Append Text to Note
		<u>^</u>
		×



If the Supervisor does not agree with a violation added by the Residential Monitor, he/she may ask for it to be removed. The Item Status should be changed to Complete, and a Comment added that it was removed per the Supervisor's instruction.

10. When finished, Click File > Save and Close Item



11. Click File > Close Items

<u>File</u>	
Add Item	
Print	
Close Items	+
	_

- 12. If changes are made to the CAP Items, a new NNC needs to be generated. Complete the steps in the <u>As Needed: Generate NNC</u> section of this manual. Save the new NNC to your device.
- 13. Return to the existing Monthly Monitoring/Supervisor Review note record from My Dashboard > Provider > Notes or the Provider > Notes tab. Update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID# if applicable
 - c. "Note Type" = Leave as Monthly Monitoring/Supervisor Review
 - d. "Note Subtype" = Change to *Further Documentation Provided*
 - e. "Description" = Change to *Further Documentation Provided*
 - f. "Note" = Enter notes as to what corrections/revisions have been made and what attachments have been provided
 - g. "Status" = Leave as Pending
 - h. Click "Add Attachment" and search for the copy of NEW NNC on the user's device. Click Upload.
 - i. Click "Remove" to delete the original NNC from the note. Only the most recent version needs to be attached.
 - j. Click the ellipsis on the "Add Note Recipient" to add an additional recipient *QA Workstream Lead*

Notes Details	
Division *	APD V
Note By *	Buck, Jennifer
Note Date *	09/25/2023
Note Type *	Monthly Monitoring/Supervisor Review
Note Sub-Type	Further Documentation Provided *
Associated Form ID#	
Description	Further Documentation Provided
	Updates are needed. Please send additional documentation. On 9/25/2023 at 8:47 PM, Jennifer Buck wrote: Enter notes as to what corrections/revisions have been made and what attachments have been provided

14. When finished click File > Save and Close Notes





If all corrective actions are completed, proceed back to <u>Supervisor Approval.</u>

As Needed: CAP Rejected Note



If all corrective actions are not completed, the Residential Monitor will create a note to advise the Provider of the outstanding items along with updating the CAP items to Rejected. The Residential Monitor can use the <u>Provider</u> <u>CAP Report</u> to track the items that have been rejected and require follow up.

1. Set "Role" = Region QA Workstream Worker then click Go



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

QC iConnect						Welc 6/20/2
File					/	
	Quick Search					
	A Test Provider	X	Providers	V	Provider Name	GO
	MY DASHBOARD	CONSUMER	PROVIDERS	INCIDENTS	CLAIMS	SCHEDULER
⊘-Filters		/	*			

3. The Provider's record will display. Navigate to the Providers > Notes tab

A TEST Provider (10002) Workers Services Provider ID Numbers Contracts Ball Linked Providers Aliases Conditions Providers Divisions Forms Enrollments Authorizations Notes Credentials EVV Scheduling Filters Note Type V Equal To V Numbers V AND V X Note Date V +	File Reports									
A TEST Provider (10002) Vorkers Services Provider ID Numbers Contracts Bas Linked Providers Allases Conditions Providers Divisions Forms Enrollments Authorizations Notes Credentials EVV Scheduling Filters Note Type V Equal To V V V V V V V V V V V V V V V V V V		Quick S	iearch							
A TEST Provider (10002) Workers Services Provider ID Numbers Contracts Bet Linked Providers Aliases Conditions Provider Divisions Forms Enrollments Authorizations Notes Credentials EVV Scheduling Note Type V Equal To V ANDV X Note Date V +					Providers			Provider I	lame	
A TEST Provider (10002) Workers Services Provider ID Numbers Contracts Bet Linked Providers Aliases Conditons Providers Divisions Forms Ennolments Authorizations Notes Credentials EVV Scheduling Note Type V Equal To V Notes V Ennolments Authorizations Notes V Scheduling Note Date V +		MY DASH	IBOARD	CONSUME	ERS PI	ROVIDERS	INCID	ENTS	CLAIMS	SCH
A TEST Provider (10002) Workers Services Provider ID Numbers Contracts Beat Linked Providers Atlases Conditions Providers Divisions Forms Enrollments Authorizations Notes EVX Scheduling Note Type Equal To V V ANDV X						\mathbf{N}		•		
Workers Services Provider ID Numbers Contracts Bay Linked Providers Alases Conditions Providers Divisions Forms Enrollments Authorizations Notes Credentals EVV Scheduling Visions Type Y Equal To Y AND X Note Date Y +	A TEST Provider (10002)						、 、			
Providers Divisions Forms Enrollments Authorizations Notes Credentials EVV Scheduling Volte Type Equal To V <td< th=""><th></th><th>Workers</th><th>Services</th><th>Provider II</th><th>O Numbers</th><th>Contracts</th><th>Bea Lir</th><th>nked Providers</th><th>Aliases</th><th>Conditions</th></td<>		Workers	Services	Provider II	O Numbers	Contracts	Bea Lir	nked Providers	Aliases	Conditions
Filters Note Type Equal To V AND Note Date +		Providers	Divisions	Forms	Enrollments	Authoriza	tions Not	credentials	EWS	cheduling
	Filters Note Type Equal To Note Date +		*	AND 🗸	×					

4. Click File > Add Notes



- 5. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID# if applicable
 - c. "Note Type" = Monthly Monitoring

- d. "Note Subtype" = CAP Rejected
- e. "Description" = CAP Rejected
- f. "Note" = Enter notes as to why the CAP is being rejected and what is lacking per 65G 2.004(2).
- g. "Status" = Pending
- h. Click the ellipsis on the "Add Note Recipient" to add the *Service Provider* as the Note Recipient
- i. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

Notes Details	
Division *	APD V
Note By *	Reed, Monica
Note Date *	09/23/2023
Associated Form ID#	759
Note Type *	Monthly Monitoring
Note Sub-Type	CAP Rejected
Description	CAP Rejected
Note	B <i>I</i> U 16px • A • Enter notes as to why the CAP is being rejected and what is lacking per 65G – 2.004(2).
Status *	Pending V
Date Completed	
Attachments Add Attachment	
Document	Description
There are no attachments to display	
Note Recipients	•
Add Note Recipient:	Clear

6. When finished click **File > Save and Close Notes**



7. Navigate to the Provider's Chapter



8. The Provider's record will display. Navigate to the **Providers > CAP** tab

apo iconnect											
File											
	Quick S	iearch									
				Providers			Provider	Name		✓ G0	€
	MY DASH	HBOARD	CONSUME	RS PF	ROVIDERS	INCIDE	ENTS	CLAIMS	SCH	EDULER	UTILITI
A TEST Provider (10002)											
	Workers	Services	Provider IC) Numbers	Contracts	Beds Lin	ked Providers	Aliases	Conditions	Service Area	a Admi
	Providers	Divisions	Forms	Enrolments	Authoriza	ations Note	s Credential	EVV S	Scheduling	CAP Appoir	tments
CAPID + Search Reset										1	

9. Select the appropriate CAP record via the hyperlink

CAP ID	QIO Report Number	Date Provider Notified	Status	Number of Alerts	Number of Items	Licensing Worker
71		07/09/2018	Pending		1	Richardson, Regina

10. Click the Items link on the left-hand navigation menu

15	CAP ID	122
N.	CAP Type	Notice of Non-Compliance 🗸
	Date of CAP	09/01/2023
	Associated Form ID#	
	Date Provider Notified	09/01/2023
	CAP Due Date	09/30/2023
	Status	Pending ~
	Comments	B I II 15px • A • Enter Comments
	Date Submitted by Provider	
	Date Verified Complete by APD Staff	
	Licensing Worker	Reed, Monica Clear Details
	QA Workstream Lead	Buck Jennifer Clear Details

11. Select an individual Item via the hyperlink in the list view grid that has not been completed

File								
CAP	- Filters Item Number S -2 Items record(s)	+ earch Reset returned - now vie	wing 1 through 2					
	Item Number	QIO Category	Remediation Type	Standard Not Met	Item Status	Due Date	Complete Date	Worker
			Licensing	1	Pending	02/23/2018		
			Licensing		Pending			

- 12. In the Item record, update the following fields:
 - a. "Item Status" = CAP Rejected
 - b. "Corrective Action Required" = Enter notes on what is rejected and what needs to be done to resolve the deficiency

Summary	
Item ID	141
Item Number	
Action Type	Licensing V
Type of Site Visit *	Qualified Organization 🗸
Discovery Source	Licensing Visit 🗸
Remediation Type	Licensing V
Employee Involved	Lisa Smith
Standard Not Met Description	FINANCIAL STANDARDS. (a) Fiscal records pertaining to the Clear
Comments	Enter the full description of the violation (i.e. Resident J.A. did not receive Seroquel as prescribed on 9/1/2019)
Item Status	CAP Rejected V
Due Date	09/16/2023
Provider Worker	Reed, Monica Clear Details
Corrective Action Required	Enter Information regarding the violation that the provider must submit. The Provider will then append with the information.
Evidence of Completion	New Text



Repeat steps 11 – 12 for each item that needs to be rejected in the CAP record.

13. When finished, Click File > Save and Close Item



As Needed: CAP Revised



The Service Provider will review the CAP Rejected Note and make the necessary revisions to the CAP item record(s). Once the CAP Items have been updated, they will update the existing note to advise the Residential Monitor that the revisions have been made.

1. Set "Role" = Service Provider then click Go



2. Navigate to the Providers > CAP tab

app iconnect													
File													
	Quick	Search		Providers			•	Provider N	ame		V	GO	\odot
	MY DAS	HBOARD	CONSUME	RS PR	OVIDERS	INCI	DENTS	0	LAIMS	SCH	EDULER	e	UTILITI
A TEST Provider (10002)													
	Workers	Services	Provider ID	Numbers	Contracts	Beds I	Linked Pr	oviders	Allases	Conditions	Serv	ice Area	Admi
	Providers	Divisions	Forms	Enrollments	Authorizati	ins No	otes C	redentials	EVVS	cheduling	CAP	Appointn	nents
CAP ID													

3. Select the appropriate CAP record via the hyperlink

1 CAP record(s) returned - now viewing 1 through 1									
				-					
	CAP ID	QIO Report Number	Date Provider Notified	Status	Number of Alerts	Number of Items	Licensing Worker		
	71		07/09/2018	Pending		1	Richardson, Regina		

4. Chek the nembra mik on the left hand havigation ment	4.	Click the Items	link on the	left-hand	navigation menu
---	----	-----------------	-------------	-----------	-----------------

	CAD					
CAP	CAP					
Items	CAP ID	122				
X	CAP Type	Notice of Non-Compliance 🗸				
	Date of CAP	09/01/2023				
	Associated Form ID#					
	Date Provider Notified	09/01/2023				
	CAP Due Date	09/30/2023				
	Status	Pending				
	Comments	B Z U Tépx • A • Enter Comments				
	Date Submitted by Provider					
	Date Verified Complete by APD Staff					
	Licensing Worker	Reed, Monica Clear Details				
	QA Workstream Lead	Buck, Jennifer Clear Details				

5. Select an Item via the hyperlink in the list view grid

CAP	Filters Item Number S 2 Items record(s)	+ earch Reset returned - now vie	wing 1 through 2	,				
	Item Number	QIO Category	Remediation type	Standard Not Met	Item Status	Due Date	Complete Date	Worker
			Licensing	1	Pending	02/23/2018		
			Licensing		Pending			

6. Enter the Corrective Action Required information and Click Append to Text to Note

Summary	
Item ID	141
Item Number	
Action Type	Licensing
Discovery Source	Licensing Visit
Remediation Type	Licensing *
Employee Involved	Lisa Smith
Comments	Enter the full description of the violation (i.e. Resident J.A. did not receive Seroquel as prescribed on 9/1/2019)
Item Status	CAP Rejected
Due Date	09/16/2023
Provider Worker	Reed, Monica Clear Details
Corrective Action Required	Enter Information regarding the violation that the provider must submit. The Provider will then append with the information.
Evidence of Completion	E.

7. When finished, Click File > Save and Close Item



8. Click File > Close Items

<u>File</u>	
Add Item	
Print	
Close Items	-

9. Navigate to the **My Dashboard > Providers > Notes > Pending** and click the hyperlink for the Pending notes.

MY DA SHBOARD	CONSUMERS	PROVIDERS	
F	ROVIDERS		
Notes			$\overline{\mathbf{O}}$
Complete			59
Draft			1
Pending			29

10. Select the **Note Type = Monthly Monitoring and Note Subtype = CAP Rejected** and select the pending record via the hyperlink.

 Filters							
Status 🛩	Equal To 👻 Pending 👻	AND 🗸 🗙					
Status 🗸	+						
	Sea	arch Reset					
15 My Dashi	board Notes record(s) returned - now vie	wing 1 through 1					
		·	/				
Provid	er NoteType	Note Date +		Description	Author	Status	
Test Provid	er Monthly Monitoring	09/23/2023	CAP Rejected		Reed, Monica	Pending	0

11. In the existing Note record, update the following fields:

- a. "Associated Form ID#" = Enter Form ID# if applicable
- b. "Note Type" = Leave as Monthly Monitoring
- c. "Note Subtype" = Update to CAP Revised
- d. "Description" = Update to CAP Revised
- e. "Note" = Enter Notes as to what corrections were made
- f. "Status" = Update to Complete
- g. Click "Add Attachment" and search for the copy of supporting documents on the user's device. Click Upload
- h. Click the ellipsis on the "Add Note Recipient" to add the *Residential Monitor* as the Note Recipient
- i. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note.

12. When finished click **File > Save and Close Notes**





Proceed to <u>CAP Accepted</u>

As Needed: CAP Missed Due Dates



If after receiving the Reminder tickler that the CAP is due after 15 calendar days, the Residential Monitor identifies that the due dates have been missed, they will notify the Service Provider via a note. The Service Provider will then have an additional 10 days to resubmit an amended CAP. The Residential Monitor can also use the <u>Provider CAP</u> <u>Report</u> to track the Item due dates.

1. Set "Role" = Region QA Workstream Worker then click Go



2. Navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.

Q <mark>c</mark> iConnect						Welc 6/20/
File					/	_
	Quick Search					
	A Test Provider	X	Providers	•	Provider Name	GO
	MY DASHBOARD	CONSUMERS	PROVIDERS	INCIDENTS	CLAIMS	SCHEDULER
Filters		1	1			

3. The Provider's record will display. Navigate to the Providers > Notes tab

File Reports									
	Quick S	earch		Providers		V	Provider N	lame	
	MY DASH	IBOARD	CONSUM	ERS PR	OVIDERS	INCIDENT	s c	CLAIMS	SCHE
					\mathbf{X}				
A TEST Provider (10002)									
	Workers	Services	Provider I	D Numbers	Contracts	Bea Linked	Providers	Aliases	Conditions
	Providers	Divisions	Forms	Enroliments	Authorizat	ions Notes	Credentials	EVV Sc	heduling
OFilters Note Type V Equal To V Note Date V			AND 🗸	×					

4. Click File > Add Notes



- 5. In the new Note record, update the following fields:
 - a. "Division" = APD
 - b. "Associated Form ID#" = Enter Form ID# if applicable
 - c. "Note Type" = Monthly Monitoring
 - d. "Note Subtype" = CAP Missed Due Dates
 - e. "Description" = CAP Missed Due Dates
 - f. "Note" = Enter notes to advise of the missed due dates
 - g. "Status" = Complete
 - h. Click the ellipsis on the "Add Note Recipient" to add the *Service Provider* as the Note Recipient
 - i. Enter Last Name and Click Search in the pop-up browser window. Select the Name of the worker to attach them to the note

Notes Details	
Division *	APD V
Note By *	Reed, Monica
Note Date *	09/23/2023
Associated Form ID#	759
Note Type *	Monthly Monitoring
Note Sub-Type	CAP Missed Due Dates 🗸
Description	CAP Missed Due Dates
Note	B I I Infpx → A → Enter notes to advise of the missed due dates
Status *	Complete V
Date Completed	09/23/2023
Attachments Add Attachment	
Document	Description
There are no attachments to display	\
Note Recipients	X
Add Note Recipient:	Clear

6. When finished click File > Save and Close Notes



 Upon saving the note, a Workflow Wizard triggered a reminder tickler for the Residential Monitor that is due in 11 calendar days. The Residential Monitor will retrieve it from My Dashboard > Provider > Ticklers.

MY DA SHBOARD	CONSUMERS	PROVIDERS	UTILITIES	REPORTS
		PROVIDERS		
Notes				۲
Complete				3
Pending				4
Ticklers				> 0
Ticklers				11
Provider Selections				۲
Accepted				1
Admitted				1



- a. Tickler "New Corrective Action Plan is Due Monthly Monitoring Missed Due Dates"
- b. Assigned to the Residential Monitor (Monitor 2)
- c. Due on the **11th** calendar day from the "Monthly Monitoring/Missed Due Dates" completed note



The Service Provider is notified that a new CAP is needed by being the recipient on the Monthly Monitoring > CAP Missed Due Dates note sent by the Residential Monitor. The Service Provider will need to proceed to <u>Submit CAP</u> and update the CAP record after reviewing the CAP Missed Due Dates note.

As Needed: Provider CAP Report



The Residential Monitor (Region QA Workstream worker) and/or Lead can use the "Provider CAP Report" to monitor CAP Item due dates. This same report can also be used track due dates of rejected CAP items

1. Set "Role" = Region QA Workstream Worker then click Go.



2. Navigate to My Dashboard, use Reports menu dropdown, and select the Provider CAP Report to monitor CAP item due dates.

q	t iConnect			Welcome, Jennifer Bug 9/25/2023 6:31 PM	k My Das	hboard Sign Out	Role Region QA Workstrea	am Worker 🗸 GO
File	Reports							
	*							
	Missing Provider Selection - HAR	Consum	ners	✓ Last Name	~	GO ADV	ANCED SEARCH	
	Pending Notes - Consumers HAR					····· ⊙		
	Pending SANs		_	1 1				
	Plan Report	MY	DASHBOARD CONSUM	MERS PROVIDERS	REPORTS			
	Planned Service Rates vs Credentials			PROVIDERS			TASKS	
Divisio	Provider CAP Report	۲	Notes			Links		۲
APD E	Provider Documentation - HAR	1	Complete		1	iConnect eLearning L	ibrary	
400.0	Provider Reactive Strategies		Dandas					
APD E	Renewal Application Submissions	1	Pending		1	APD Help Desk		

- 3. The report parameters window displays. Update the following:
 - a. "CAP Begin Date" Enter the CAP start date
 - b. "CAP End Date" Enter the CAP end date
 - c. "QIO Report Number" Enter the number or select NULL to return all results.
 - d. Click "View Report"
- 4. The page refreshes and the report results are returned. Click the export options icon then select Excel to save this report in Excel format. This will be helpful so the results can be filtered and sorted by the user.

CAP Begin Date	9/25/2022 12:00:0	00 AM		CAP End Date:	9/25/2023 12:00:00	AM ONULL	View Report
QIO Report Nui	mber:		NULL NULL				
			- 1				
	of 2 ? 🕨 🚺 💠		Find Next	≤ •			
Provide	er CAP Rep	ort		XML file with rep	port data		
Depart Dup Tim	L			PDF	entriced)		
Report Run III	18:9/20/20/20 0:30:39 PW			Excel			
Region	Provider County	ProviderID	Provider Ag	TIFF file		Provider Medicaid ID	CAP ID
				Word			
				MHTML (web an	chive)		
NORTHEAST	Duval	21347	Test Provider			FL545454	86
NORTHEAST	Duval	21347	Test Provider			FL545454	87
NORTHEAST	Duval	21347	Test Provider			FI 545454	87
- CONTRACT	Data	22017	1050 110/1001			1 2010101	
NORTHEAST	Duval	21347	Test Provider			FL545454	92
NORTHEAST	Duval	21347	Test Provider			FL545454	103
NORTHEAST	Duval	21347	Test Provider			FL545454	113

As Needed: Repeat Violations

During subsequent monthly monitoring visits, if the Residential Monitor identifies that the facility is still in violation of a standard which was identified on the prior month's site visit, the violation will not be added to the current month's new CAP record.



The previous months CAP will still be open for those previously identified violations. The item/violation will be updated in the original CAP record with new comments as applicable.

If new violations are identified for the current month, the Residential Monitor will open a new CAP for the new violations. The Residential Monitor will generate the NNC for the new violations only.

1. Set "Role" = Region QA Workstream Worker then click Go.



2. To update the items in the CAP, navigate to the **Providers** chapter and enter the Provider's Facility name in the Quick Search filter and click go.



3. The Provider's record will display. Navigate to the Providers > CAP tab

Qpd iConnect													
File													
	Quick S	Search											
				Providers			~	Provider I	Name		~	GO	\odot
	MY DASH	HBOARD	CONSUME	is P	ROVIDERS	IN	CIDENTS	8	CLAIMS	SCH	EDULER	- L	UTILITI
A TEST Provider (10002)													
	Workers	Services	Provider ID	Numbers	Contracts	Beds	Linked	Providers	Aliases	Conditions	Servi	ce Area	Admir
	Providers	Divisions	Forms	Enrollments	Authoriza	tions	Notes	Credentials	EWS	cheduling	САР	Appointm	nents
CAP ID +											,		

4. Select the appropriate CAP record via the hyperlink

Test Provid	ler (21347)												
			Workers	Workers Services Provider ID Numbers Con		Contracts Beds Linked Providers			ers Condit	ons Service	Area Admin	rea Admin Actions	
			Providers	Divisions	EVV Activities F	orms Enrolli	ments	Authorizations	Notes C	redentials E	VV Scheduling	САР	Ар
-Filters CAP ID 8 Provider	Search rs CAP record(s) returne	+ Reset d - now viewing 1 through 8-											
CAPID	QIO Report Number	CAP Type	Date Provider Notified -	CAP Due Dat	e Status	Number of	f Alerts	Number of Ite	ems Licer	sing Worker	QA Workstr	eam Wor	ker
121		Notice of Non-Compliance	08/01/2023	08/15/2023	Pending			1	Reed,	Monica			
113		Plan of Remediation	07/20/2023		Pending			1			Reed, Monica		
114		Plan of Remediation	07/03/2023	08/03/2023	Pending			0			Reed, Monica		

5. Click the Items link on the left-hand navigation menu

File Reports									
AP	CAP								
	CAP ID	123							
ems	САР Туре	Notice of Non-Compliance	-						
•	Date of CAP	09/25/2023							
~	Associated Form ID#	502							
	Date Provider Notified	09/25/2023							
	CAP Due Date	10/10/2023							
	Status	Pending ~							
	Comments	B <i>I</i> <u>U</u> 16px • A •							
	Date Submitted by Provider								
	Date Verified Complete by APD Staff								
	Licensing Worker	Reed, Monica		Clear	Details				
	OA Westerstein Land	Ruck Jappifor		~					

6. Select an Item via the hyperlink in the list view grid

File								
CAP Items	Filters Item Number S -2 Items record(s)	earch Reset	wing 1 through 2					
	Item Number	QIO Category	Remediation Type	Standard Not Met	Item Status	Due Date	Complete Date	Worker
			Licensing	1	Pending	02/23/2018		
			Licensing		Pending			

- 7. Update the following fields as applicable:
 - a. "Comments" = add information
 - b. "Due Date" = update due date if needed
 - c. "Corrective Action Required" = add information and Click Append to Text to Note
- 8. When finished, Click File > Save and Close Item



9. Click File > Close Items



10. The Residential Monitor will complete the <u>As Needed: Add CAP for Violations</u> section of this manual if there are new violations identified during the current month's site visit.