Employee Responsibility Questionnaire

Welcome

Let's Personalize Your EMR Experience.

Answering a few quick questions will help us tailor your permissions and documentation flow.

Instructions:
Please answer each question by selecting one option from the dropdown:
0 – Not part of my responsibilities
1 – I do this for my assigned patients
2 – I do this for my team's patients
3 – I do this for all patients

Obtaining required authorizations

1. Requesting authorization for start of care or evaluation visits via call *

- (●) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

2. Requesting authorization for start of care or evaluation visits by submitting the request online *

- (●) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team

- ○ 3 – I perform this for all patients

3. Requesting authorization for routine skilled nursing or therapy visits *(Example: follow-up requests after SOC/recert)* *

- ◉ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

4. Requesting authorization for recertification periods *(Example: obtaining auth for the next cert period)* *

- ◉ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

5. Requesting authorization for changes in visit frequency or added services *(Example: new therapy discipline, frequency increase, supply/DME need)* *

- ◉ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

6. Tracking authorization limits
(monitoring remaining authorized visits) *

- (●) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

7. Updating internal systems with new authorizations
(entering auth numbers, dates, visit ranges) *

- (●) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Performing QA on assessments

8. Performing QA on OASIS assessments
(Example: SOC, Recertification, ROC, Discharge, Transfer, Death at Home) *

- ( ) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- (●) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

9. Performing QA on Therapy & Nursing Evaluations
(Example: nursing evaluation, therapy evaluation, MSW evaluation, non-OASIS assessment) *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

Scheduling assessment visits

10. Scheduling SOC visits *

- ○ 0 – Not part of my responsibilities
- ◉ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

11. Scheduling recertification assessments *

- ○ 0 – Not part of my responsibilities
- ◉ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

12. Scheduling evaluation visits *

- ○ 0 – Not part of my responsibilities
- ◉ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

13. Scheduling supervisory visits *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

Scheduling routine visit types

14. Scheduling skilled nursing visits *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

15. Scheduling therapy visits (PT/OT/ST) *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

16. Scheduling home health aide visits *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

17. Scheduling MSW visits *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

Determining visit frequencies

18. Determining visit frequencies based on physician orders or recommendations *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me

- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients

19. Determining visit frequencies based on payer/authorization requirements *

- [ ] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me
- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients

20. Determining visit frequencies based on clinical assessment findings or changes in patient's condition *

- [ ] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me
- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients

Documenting reasons for missed visits

21. Documenting reasons for missed visits due to patient-related reasons *(Example: refusal, no answer, not home, patient request)* *

- [ ] 0 – Not part of my responsibilities
- [x] 1 – I do this for the patients assigned to me
- [ ] 2 – I do this for patients assigned to my team

- ○ 3 – I perform this for all patients

22. Documenting reasons for missed visits due to clinical/medical reasons *(Example: hospitalization, change in condition, medical hold)* *

- ○ 0 – Not part of my responsibilities
- ◉ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

23. Documenting reasons for missed visits due to scheduling/logistical reasons *(Example: scheduling conflict, weather, transportation)* *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

24. Documenting reasons for missed visits due to agency/system reasons *(Example: staffing issue, system error)* *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

Reviewing careplans for completeness & accuracy

25. Reviewing nursing care plans
(Example: verifying goals, interventions, updates, or care needs) *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

26. Reviewing therapy care plans (PT/OT/ST)
(Example: verifying goals, functional limitations, progress measures) *

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

Creating 485 or Plan of Care

27. Creating Start of Care (SOC) 485 or Plan of Care
(initial Plan of Care after admission)
*

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team

- ◯ 3 – I perform this for all patients

28. Creating Recertification 485 or Plan of Care
(updating Plan of Care for the next certification period) *

- ◯ 0 – Not part of my responsibilities
- ◯ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ◯ 3 – I perform this for all patients

Performing QA on 485 or Plan of Care

29. Performing QA on SOC 485s
(reviewing for accuracy, completeness, compliance, coding alignment)
If applicable**:** *Describe what areas you review (coding, frequency, goals).* *

- ☐ 0 – Not part of my responsibilities
- ☐ 1 – I do this for the patients assigned to me
- ☑ 2 – I do this for patients assigned to my team
- ☐ 3 – I perform this for all patients
- ☐ Other

30. Performing QA on Recertification 485s
(validating ongoing needs and updated goals) *

- ◯ 0 – Not part of my responsibilities
- ◯ 1 – I do this for the patients assigned to me

- (●) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Sending 485s for physician's signature

31. Sending SOC 485s to the physician for signature
If applicable: specify methods used (fax, EMR, electronic portal) *

- [ ] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me
- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

32. Sending Recertification 485s to the physician for signature
If applicable: specify methods used (fax, EMR, electronic portal) *

- ( ) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- (●) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Creating Verbal Orders

33. Creating verbal orders for changes in visit frequency *(increase, decrease, add discipline, etc.)* *

- [ ] 0 – Not part of my responsibilities
- [x] 1 – I do this for the patients assigned to me
- [ ] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

34. Creating verbal orders for medication updates *(new medications, dose adjustments, discontinuations)* *

- ( ) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- (•) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

35. Creating verbal orders for treatment or care plan adjustments *(DME orders, therapy orders, wound care updates, labs)* *

- ( ) 0 – Not part of my responsibilities
- (•) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Performing QA on Verbal Orders

36. Performing QA on verbal orders related to visit frequency *(checking accuracy of new or updated frequencies)* *

- [ ] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me
- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

37. Performing QA on medication-related verbal orders *(ensuring dosage, route, and instructions match documentation)* *

- ( ) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- (•) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

38. Performing QA on treatment or DME verbal orders *(ensuring orders match evaluation findings and physician intent)* *

- ( ) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- (•) 2 – I do this for patients assigned to my team

- ◯ 3 – I perform this for all patients

Sending Verbal Orders for physician's signature

39. Sending verbal orders for frequency changes to the physician
If applicable: *Describe how you send these (fax/email/portal).* *

- ☐ 0 – Not part of my responsibilities
- ☐ 1 – I do this for the patients assigned to me
- ☑ 2 – I do this for patients assigned to my team
- ☐ 3 – I perform this for all patients
- ☐ Other

40. Sending medication-related verbal orders to the physician
*

- ◯ 0 – Not part of my responsibilities
- ◯ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ◯ 3 – I perform this for all patients

41. Sending procedures or DME verbal orders to the physician
*

- ◯ 0 – Not part of my responsibilities
- ◯ 1 – I do this for the patients assigned to me

- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients

Managing patient care needs

42. Monitoring patient progress toward established goals
(Example: mobility goals, ADL goals, therapy milestones, wound healing goals) *

- [ ] 0 – Not part of my responsibilities
- [x] 1 – I do this for the patients assigned to me
- [ ] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

43. Evaluating changes in patient symptoms or condition
(Example: worsening, improvement, stability of symptoms relevant to the careplan)
*

- [ ] 0 – Not part of my responsibilities
- [x] 1 – I do this for the patients assigned to me
- [ ] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients

44. Determining when updates or modifications to the careplan are needed
(Example: frequency changes, added disciplines, new interventions)
*

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

45. Communicating with the physician when updates or modifications to the careplan are required
(Example: reporting changes in patient condition, requesting new orders) *

- ○ 0 – Not part of my responsibilities
- ◉ 1 – I do this for the patients assigned to me
- ○ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

Communication with referral sources

46. Communicating with referral sources regarding pending admissions *(hospital discharge planners, SNFs, clinics, physicians)* *

- ☑ 0 – Not part of my responsibilities
- ☐ 1 – I do this for the patients assigned to me
- ☐ 2 – I do this for patients assigned to my team
- ☐ 3 – I perform this for all patients
- ☐ Other

47. Requesting missing documentation required for admission
(H&P, Medication records, orders, discharge summary)
*

- (●) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

48. Confirming patient readiness or eligibility for admission
(insurance, orders, documentation readiness)

*

- (●) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

49. Communicating with the physician when updates or modifications to the careplan are required
(Example: reporting changes in patient condition, requesting new orders)
*

- ( ) 0 – Not part of my responsibilities
- (●) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Transmitting datasets

50. Transmitting OASIS datasets *

- [x] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me
- [ ] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

51. Submitting or transmitting other required datasets or reports *(quality reporting, agency performance tracking, payer reports)* *

- (•) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- ( ) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Scheduling procedures

52. Skilled Nursing Procedure
(Example: wound care, catheter care, injections, IV therapy) *

- [ ] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me

- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

53. Therapy Procedures
(Example: PT/OT/ST interventions performed during visits)
*

- ( ) 0 – Not part of my responsibilities
- ( ) 1 – I do this for the patients assigned to me
- (•) 2 – I do this for patients assigned to my team
- ( ) 3 – I perform this for all patients

Performing QA on progress notes

54. Performing QA on nursing progress notes *(checking clinical accuracy, completeness, interventions, goals)*
If applicable: *Specify areas you review most often.* *

- [ ] 0 – Not part of my responsibilities
- [ ] 1 – I do this for the patients assigned to me
- [x] 2 – I do this for patients assigned to my team
- [ ] 3 – I perform this for all patients
- [ ] Other

55. Performing QA on therapy progress notes (PT/OT/ST)
(exercise logs, progress measures, treatment details)
*

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

56. Performing QA on home health aide notes
(task completion, ADL notes, safety concerns)
*

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

57. Performing QA on social work notes
(psychosocial needs, resources, goals)
*

- ○ 0 – Not part of my responsibilities
- ○ 1 – I do this for the patients assigned to me
- ◉ 2 – I do this for patients assigned to my team
- ○ 3 – I perform this for all patients

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