

Resident Level Quality Measure/Indicator Report: Chronic Care Sample

Facility Name XXXXXXXXXXXXXXXX
City/State DALLAS, TX
Provider Number XXXXXX
Login/Facility ID XXXXXXXXXXXX

Run Date 07/20/07 08:48:27
Report Period 01/01/07 - 06/30/07
Report Version Number 1.07
Data was calculated on 07/16/2007

Resident Int Id	Resident Name	AA8a	Accid		Behavioral		Clin	Cog	Elim/Incont				Infct	Nutrit/Eat			Pain	Phys Functioning			Psych Drug Use			Qual Life		Skin Care		Count						
			New Fract	Falls	Depression	Problem Behavior			Dprs No Tx	9+ Meds	Cog Impair	Bwl/Blad Incont		Cath Insert	Incont No TP	Fecal Impct		UTIs	Wt Loss	Tube Feed	Dhyd	Mod/Sevr Pain	ADL Help Incrs	Most Time Chair	Move Ability Wrse	Decln ROM	Antipsy w/o		Psychotic Condition	Anti-anx/Hpnot	Hpnot 2x Week	Phys Rstrn	Little Activ	Pressure Ulcers
					Hi	Lo						Lo															Hi		Lo					Hi
Active Residents																																		
XXXXXX	PATIENT A1	05								X				X															2					
XXXXXX	PATIENT B1	05					X					X	X																3					
XXXXXX	PATIENT C1	02			X					X								X											3					
XXXXXX	PATIENT D1	05					X	X																					2					
XXXXXX	PATIENT E1	05			X		X						X													X			4					
XXXXXX	PATIENT F1	05																											0					
XXXXXX	PATIENT G1	05			X																								1					
XXXXXX	PATIENT H1	05			X																								1					
XXXXXX	PATIENT I1	05					X	X		X													X						3					
XXXXXX	PATIENT J1	05					X	X		X							X						X						5					
XXXXXX	PATIENT K1	01								X		X											X						3					
XXXXXX	PATIENT L1	05					X																			X			2					
XXXXXX	PATIENT M1	05			X		X															X							3					
XXXXXX	PATIENT N1	05																											0					
XXXXXX	PATIENT O1	05					X	X																					2					
XXXXXX	PATIENT P1	05					X																X	X					3					
XXXXXX	PATIENT Q1	05								X		X											X						3					
XXXXXX	PATIENT R1	01																											0					
XXXXXX	PATIENT S1	05	X		X																	X							3					
XXXXXX	PATIENT T1	05					X																						1					
XXXXXX	PATIENT U1	05					X	X																					2					
XXXXXX	PATIENT V1	05	X		X		X															X							4					
XXXXXX	PATIENT W1	03			X				X								X									X			4					

Note: X=triggered, blank=not triggered or excluded.

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					Hi	Lo			Lo												Hi	Lo					Hi	Lo	
Active Residents																													
XXXXXX	PATIENT X1	03								X	X		X				X	X				X							6
XXXXXX	PATIENT Y1	05																											0
XXXXXX	PATIENT Z1	02			X		X																						2
XXXXXX	PATIENT A2	05						X	X																				2
XXXXXX	PATIENT B2	05	X						X			X																	3
XXXXXX	PATIENT C2	05	X																										1
XXXXXX	PATIENT D2	05																											0
XXXXXX	PATIENT E2	05	X					X				X																	3
XXXXXX	PATIENT F2	05																											0
XXXXXX	PATIENT G2	05			X			X																					2
XXXXXX	PATIENT H2	05						X																					1
XXXXXX	PATIENT I2	05	X	X			X	X													X		X						6
XXXXXX	PATIENT J2	05			X			X	X																				3
XXXXXX	PATIENT K2	01					X		X		X																		3
XXXXXX	PATIENT L2	03			X			X				X									X								4
XXXXXX	PATIENT M2	05			X								X												X	X			4
XXXXXX	PATIENT N2	05				X																							1
XXXXXX	PATIENT O2	05						X														X							2
XXXXXX	PATIENT P2	02						X																					1
XXXXXX	PATIENT Q2	02						X										X											2
XXXXXX	PATIENT R2	05			X								X																2
XXXXXX	PATIENT S2	01	X						X																				2
XXXXXX	PATIENT T2	05							X															X					2

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					Hi	Lo			Lo												Hi	Lo					Hi	Lo	
Active Residents																													
XXXXXX	PATIENT U2	02						X	X																				3
XXXXXX	PATIENT V2	05																											0
XXXXXX	PATIENT W2	05																											0
XXXXXX	PATIENT X2	05							X																				1
XXXXXX	PATIENT Y2	05						X	X																				2
XXXXXX	PATIENT Z2	05																											0
XXXXXX	PATIENT A3	01						X																					1
XXXXXX	PATIENT B3	01																				X							1
XXXXXX	PATIENT C3	01			X																X		X						3
XXXXXX	PATIENT D3	01			X		X	X													X								4
XXXXXX	PATIENT E3	05			X		X	X																					3
XXXXXX	PATIENT F3	05		X	X		X														X								4
XXXXXX	PATIENT G3	05											X																1
XXXXXX	PATIENT H3	05					X																						1
XXXXXX	PATIENT I3	05							X																				1
XXXXXX	PATIENT J3	05			X		X																						2
XXXXXX	PATIENT K3	03	X	X						X											X								4
XXXXXX	PATIENT L3	05							X																				1
XXXXXX	PATIENT M3	01					X		X		X															X			4
XXXXXX	PATIENT N3	03					X					X																	2
XXXXXX	PATIENT O3	05	X				X																						2
XXXXXX	PATIENT P3	05																											0
XXXXXX	PATIENT Q3	05			X		X																						2

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					Hi	Lo			Lo												Hi	Lo				Hi	Lo	
Active Residents																												
XXXXXXX	PATIENT R3	05						X																				2
XXXXXXX	PATIENT S3	03			X	X		X	X	X			X				X				X							8
XXXXXXX	PATIENT T3	05						X	X	X									X									4
XXXXXXX	PATIENT U3	03						X	X												X	X			X			5
XXXXXXX	PATIENT V3	02											X															1
XXXXXXX	PATIENT W3	01											X															1
XXXXXXX	PATIENT X3	05						X																				1
XXXXXXX	PATIENT Y3	05							X																			1
XXXXXXX	PATIENT Z3	05						X					X												X			3
XXXXXXX	PATIENT A4	05						X																				1
XXXXXXX	PATIENT B4	05																										0
XXXXXXX	PATIENT C4	05	X					X	X																			3
XXXXXXX	PATIENT D4	05						X					X									X			X			4
XXXXXXX	PATIENT E4	05						X		X																		2
XXXXXXX	PATIENT F4	05						X		X																		2
XXXXXXX	PATIENT G4	02	X																									1
XXXXXXX	PATIENT H4	01																				X						1
XXXXXXX	PATIENT I4	05																					X					1
XXXXXXX	PATIENT J4	05						X																				1
XXXXXXX	PATIENT K4	05																										0
XXXXXXX	PATIENT L4	05						X																				1
XXXXXXX	PATIENT M4	05								X																		1
XXXXXXX	PATIENT N4	01																										0

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					Hi	Lo			Lo												Hi	Lo				Hi	Lo	
Active Residents																												
XXXXXXX	PATIENT O4	05																										1
XXXXXXX	PATIENT P4	05																										0
XXXXXXX	PATIENT Q4	02						X						X														2
XXXXXXX	PATIENT R4	05						X																				1
XXXXXXX	PATIENT S4	05						X	X																	X		3
XXXXXXX	PATIENT T4	05							X																			1
XXXXXXX	PATIENT U4	05																										0
XXXXXXX	PATIENT V4	05						X																X				2
XXXXXXX	PATIENT W4	05						X																				1
XXXXXXX	PATIENT X4	05		X		X		X	X											X								5
XXXXXXX	PATIENT Y4	05								X													X					2
XXXXXXX	PATIENT Z4	05																										0
XXXXXXX	PATIENT A5	05												X														1
XXXXXXX	PATIENT B5	05						X															X					2
XXXXXXX	PATIENT C5	05						X																				1
XXXXXXX	PATIENT D5	05						X						X														2
XXXXXXX	PATIENT E5	05		X		X		X	X														X					5
XXXXXXX	PATIENT F5	05																										0
XXXXXXX	PATIENT G5	03			X	X								X									X			X		6
XXXXXXX	PATIENT H5	05																										0
XXXXXXX	PATIENT I5	05						X	X																			2
Discharged Residents																												
XXXXXXX	PATIENT J5	01						X																X				2

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					Hi	Lo			Lo												Hi	Lo					Hi	Lo	
Discharged Residents																													
XXXXXXX	PATIENT K5	05												X															1
XXXXXXX	PATIENT L5	01	X						X					X															3
XXXXXXX	PATIENT M5	05						X																					1
XXXXXXX	PATIENT N5	05			X																								1
XXXXXXX	PATIENT O5	01	X	X	X	X	X	X	X																				5
XXXXXXX	PATIENT P5	02					X		X		X	X																	4
XXXXXXX	PATIENT Q5	05						X								X													2
XXXXXXX	PATIENT R5	01					X															X							2
XXXXXXX	PATIENT S5	05					X											X											2
XXXXXXX	PATIENT T5	05					X																						1
XXXXXXX	PATIENT U5	01							X		X															X			3
XXXXXXX	PATIENT V5	01	X				X	X														X							4
XXXXXXX	PATIENT W5	05					X															X							2
XXXXXXX	PATIENT X5	03																				X							1
XXXXXXX	PATIENT Y5	05			X																								1
XXXXXXX	PATIENT Z5	01	X				X									X	X				X	X							6
XXXXXXX	PATIENT A6	01	X													X													2
XXXXXXX	PATIENT B6	01					X	X																					2
XXXXXXX	PATIENT C6	05					X														X	X							3
XXXXXXX	PATIENT D6	03	X	X		X	X				X			X	X						X				X	X			10
XXXXXXX	PATIENT E6	05																											0
XXXXXXX	PATIENT F6	05					X								X														2
XXXXXXX	PATIENT G6	02					X																						1

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					Hi	Lo				Lo									Hi	Lo			Hi	Lo		
Discharged Residents																										
XXXXXXX	PATIENT H6	01				X	X			X	X				X						X	X			X	8
XXXXXXX	PATIENT I6	01					X	X		X	X					X								X	X	7
XXXXXXX	PATIENT J6	01												X												1
XXXXXXX	PATIENT K6	01	X																							1
XXXXXXX	PATIENT L6	05			X																					1
XXXXXXX	PATIENT M6	03	X	X	X	X		X		X	X			X	X			X	X		X					12
XXXXXXX	PATIENT N6	01	X								X															2

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