

State of New Jersey  
 New Jersey Department of  
 Central Procurement (4210)  
 Release Purchase Order  
 90-22-DOH

P.O. Date: 9/15/2022

Blanket Order Number  
  
 22-WAIVE-17179:2  
  
 SHOW THIS NUMBER ON ALL  
 PACKAGES, INVOICES AND  
 SHIPPING PAPERS.

Agency Ref. #

V  
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Vendor Number: [REDACTED]  
 CertiSurv, LLC  
  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 [REDACTED]  
  
 Vendor Alternate ID: [REDACTED]  
  
 Remit Address:  
 Robert Feurer  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 US  
  
 Email: [REDACTED]  
 Phone Number: [REDACTED]

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[REDACTED]  
 HFEL Administrative Services Fiscal Office  
 120 South Stockton Street Lower Level  
 Trenton, NJ 08611  
 US  
 Email: [REDACTED]  
 Phone: [REDACTED]

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[REDACTED]  
 55 North Willow Street  
 TRENTON, NJ 08625-0360  
 US  
 Email: [REDACTED]  
 [REDACTED]

INVOICES: Direct invoices in DUPLICATE to the address shown above. TERMS AND CONDITIONS set forth in our Bid or Quotation, on the reverse side hereof or incorporated herein by reference become a part of this

ATTN: Contact [REDACTED]

Account Code: 20-100-S1DC- -126-J003-3620- - -1129  Solicitation (Bid) No.:	Payment Terms: Shipping Terms: Freight Terms: Delivery Calendar Day(s) A.R.O.: 0																		
Item # 1 Class-Item 907-83  Nursing Home Complaint Survey. \$8,250 each																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Quantity</th> <th>Unit Price</th> <th>UOM</th> <th>Discount %</th> <th>Total Discount</th> <th>Tax Rate</th> <th>Tax Amount</th> <th>Freight</th> <th>Total Cost</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">10.00</td> <td style="text-align: right;">\$ 8,250.00</td> <td style="text-align: center;">EA</td> <td style="text-align: center;">0.00 %</td> <td style="text-align: right;">\$ 0.00</td> <td></td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 82,500.00</td> </tr> </tbody> </table>		Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost	10.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 82,500.00
Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost											
10.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 82,500.00											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>LN/FY/Account Code</u></td> <td style="width: 30%;"><u>Dollar Amount</u></td> </tr> <tr> <td>1/23/20-100-S1DC- -126-J003-3620- - -1129</td> <td style="text-align: right;">\$ 82,500.00</td> </tr> </table>		<u>LN/FY/Account Code</u>	<u>Dollar Amount</u>	1/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 82,500.00														
<u>LN/FY/Account Code</u>	<u>Dollar Amount</u>																		
1/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 82,500.00																		

Item # 2  
 Class-Item 907-83

ESRD Recertification Survey, \$13,500 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
3.00	\$ 13,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 40,500.00

LN/FY/Account Code	Dollar Amount
2/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 40,500.00

Item # 3  
 Class-Item 907-83

Assisting Living FIC Survey, \$4,950 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 4,950.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 24,750.00

LN/FY/Account Code	Dollar Amount
3/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 24,750.00

TAX: \$ 0.00  
 FREIGHT: \$ 0.00  
 TOTAL: \$ 147,750.00

APPROVED

By: [REDACTED]

Phone#: [REDACTED]

BUYER

State of New Jersey  
 New Jersey Department of  
 Central Procurement (4210)  
 Release Purchase Order  
 90-22-DOH

P.O. Date: 9/29/2022

Blanket Order Number  
  
**22-WAIVE-17179:3**  
  
 SHOW THIS NUMBER ON ALL  
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Agency Ref. #

VENDOR

Vendor Number: [REDACTED]  
 CertiSurv, LLC  
  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 [REDACTED]  
  
 Vendor Alternate ID: [REDACTED]  
  
 Remit Address:  
 Robert Feurer  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 US  
  
 Email: [REDACTED]  
 Phone Number: [REDACTED]

SHIPPING TO BILL TO

[REDACTED]  
 HFEL Administrative Services Fiscal Office  
 120 South Stockton Street Lower Level  
 Trenton, NJ 08611  
 US  
 Email: [REDACTED]  
 [REDACTED]  
  
 [REDACTED]  
 55 North Willow Street  
 TRENTON, NJ 08625-0360  
 US  
 Email: [REDACTED]  
 [REDACTED]

INVOICES: Direct invoices in DUPLICATE to the address shown above. TERMS AND CONDITIONS set forth in our Bid or Quotation, on the reverse side hereof or incorporated herein by reference become a part of this

ATTN: Contact [REDACTED]

Account Code: 20-100-S1DC- -126-J003-3620- - -1129  Solicitation (Bid) No.:	Payment Terms: Shipping Terms: Freight Terms: Delivery Calendar Day(s) A.R.O.: 0																		
Item # 1 Class-Item 907-83  Assisted Living Complaint Survey w/FIC // \$9,500 each																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Quantity</th> <th style="width: 10%;">Unit Price</th> <th style="width: 10%;">UOM</th> <th style="width: 10%;">Discount %</th> <th style="width: 10%;">Total Discount</th> <th style="width: 10%;">Tax Rate</th> <th style="width: 10%;">Tax Amount</th> <th style="width: 10%;">Freight</th> <th style="width: 10%;">Total Cost</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2.00</td> <td style="text-align: right;">\$ 9,500.00</td> <td style="text-align: center;">EA</td> <td style="text-align: center;">0.00 %</td> <td style="text-align: right;">\$ 0.00</td> <td></td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 19,000.00</td> </tr> </tbody> </table>		Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost	2.00	\$ 9,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 19,000.00
Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost											
2.00	\$ 9,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 19,000.00											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>LN/FY/Account Code</u></td> <td style="width: 30%; text-align: right;"><u>Dollar Amount</u></td> </tr> <tr> <td>1/23/20-100-S1DC- -126-J003-3620- - -1129</td> <td style="text-align: right;">\$ 19,000.00</td> </tr> </table>		<u>LN/FY/Account Code</u>	<u>Dollar Amount</u>	1/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 19,000.00														
<u>LN/FY/Account Code</u>	<u>Dollar Amount</u>																		
1/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 19,000.00																		

Item # 2  
 Class-Item 907-83

Assisted Living Complaint Survey // \$8,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 41,250.00

<u>LN/FY/Account Code</u> 2/23/20-100-S1DC- -126-J003-3620- - -1129	<u>Dollar Amount</u> \$ 41,250.00
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Item # 3  
 Class-Item 907-83

ERSD Recertification Survey // \$13,500

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 13,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 67,500.00

<u>LN/FY/Account Code</u> 3/23/20-100-S1DC- -126-J003-3620- - -1129	<u>Dollar Amount</u> \$ 67,500.00
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TAX: \$ 0.00  
 FREIGHT: \$ 0.00  
 TOTAL: \$ 127,750.00

APPROVED

By: \_\_\_\_\_  
 Phone#: \_\_\_\_\_  
 BUYER

State of New Jersey  
 New Jersey Department of  
 Central Procurement (4210)  
 Release Purchase Order  
 90-22-DOH

P.O. Date: 10/4/2022

Blanket Order Number  
  
 22-WAIVE-17179:4  
  
 SHOW THIS NUMBER ON ALL  
 PACKAGES, INVOICES AND  
 SHIPPING PAPERS.

Agency Ref. #

V  
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Vendor Number: [REDACTED]  
 CertiSurv, LLC  
  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 [REDACTED]  
  
 Vendor Alternate ID: [REDACTED]  
  
 Remit Address:  
 Robert Feurer  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 US  
  
 Email: [REDACTED]

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[REDACTED]  
 HFEL Administrative Services Fiscal Office  
 120 South Stockton Street Lower Level  
 Trenton, NJ 08611  
 US  
 Email: [REDACTED]

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[REDACTED]  
 55 North Willow Street  
 TRENTON, NJ 08625-0360  
 US  
 Email: [REDACTED]

INVOICES: Direct invoices in DUPLICATE to the address shown above. TERMS AND CONDITIONS set forth in our Bid or Quotation, on the reverse side hereof or incorporated herein by reference become a part of this

ATTN: Contact [REDACTED]

Account Code: 20-100-S1DC- -126-J003-3620- - -1129  Solicitation (Bid) No.:	Payment Terms: Shipping Terms: Freight Terms: Delivery Calendar Day(s) A.R.O.: 0																		
Item # 1 Class-Item 907-83  Assisted Living FIC Survey // Atria Cherry Hill/ Residence of Cherry Hill // \$4,950																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Quantity</th> <th style="width: 10%;">Unit Price</th> <th style="width: 10%;">UOM</th> <th style="width: 10%;">Discount %</th> <th style="width: 10%;">Total Discount</th> <th style="width: 10%;">Tax Rate</th> <th style="width: 10%;">Tax Amount</th> <th style="width: 10%;">Freight</th> <th style="width: 10%;">Total Cost</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1.00</td> <td style="text-align: right;">\$ 4,950.00</td> <td style="text-align: center;">EA</td> <td style="text-align: center;">0.00 %</td> <td style="text-align: right;">\$ 0.00</td> <td></td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 4,950.00</td> </tr> </tbody> </table>		Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost	1.00	\$ 4,950.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 4,950.00
Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost											
1.00	\$ 4,950.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 4,950.00											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;"> <u>LN/FY/Account Code</u>                      1/23/20-100-S1DC- -126-J003-3620- - -1129                 </td> <td style="width: 30%; padding: 5px; text-align: right;"> <u>Dollar Amount</u>                      \$ 4,950.00                 </td> </tr> </table>		<u>LN/FY/Account Code</u> 1/23/20-100-S1DC- -126-J003-3620- - -1129	<u>Dollar Amount</u> \$ 4,950.00																
<u>LN/FY/Account Code</u> 1/23/20-100-S1DC- -126-J003-3620- - -1129	<u>Dollar Amount</u> \$ 4,950.00																		

Item # 2  
 Class-Item 907-83

(2) Nursing Home Complaint Survey // Elmwood Hills Healthcare & Cedar Grove Respiratory and Nursing // \$8,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
2.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 16,500.00

LN/FY/Account Code	Dollar Amount
2/23/20-100-S1DC- -126-J003-3620- - -1129	\$ 16,500.00

TAX: \$ 0.00  
 FREIGHT: \$ 0.00  
 TOTAL: \$ 21,450.00

APPROVED

By: \_\_\_\_\_  
 Phone#: \_\_\_\_\_  
 BUYER

State of New Jersey  
 New Jersey Department of  
 Central Procurement (4210)  
 Release Purchase Order  
 90-22-DOH

P.O. Date: 10/26/2022

Blanket Order Number  
  
 22-WAIVE-17179:6  
  
 SHOW THIS NUMBER ON ALL  
 PACKAGES, INVOICES AND  
 SHIPPING PAPERS.

Agency Ref. #

V  
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Vendor Number: [REDACTED]  
 CertiSurv, LLC  
  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 [REDACTED]  
  
 Vendor Alternate ID: [REDACTED]  
  
 Remit Address:  
 Robert Feurer  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 US  
  
 Email: [REDACTED]

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[REDACTED]  
 HFEL Administrative Services Fiscal Office  
 120 South Stockton Street Lower Level  
 Trenton, NJ 08611  
 US  
 Email: [REDACTED]

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Jessica Alvarez  
 55 North Willow Street  
 TRENTON, NJ 08625-0360  
 US  
 Email: [REDACTED]

INVOICES: Direct invoices in DUPLICATE to the address shown above. TERMS AND CONDITIONS set forth in our Bid or Quotation, on the reverse side hereof or incorporated herein by reference become a part of this

ATTN: Contact [REDACTED]

Account Code: 20-100-S1DC- -126-2001-3620- - -1129  Solicitation (Bid) No.:	Payment Terms: Shipping Terms: Freight Terms: Delivery Calendar Day(s) A.R.O.: 0																		
Item # 1 Class-Item 907-83  NH Compliant Investigation Survey // \$8,250 each // 10 per month																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Quantity</th> <th style="width: 15%;">Unit Price</th> <th style="width: 10%;">UOM</th> <th style="width: 10%;">Discount %</th> <th style="width: 10%;">Total Discount</th> <th style="width: 10%;">Tax Rate</th> <th style="width: 10%;">Tax Amount</th> <th style="width: 10%;">Freight</th> <th style="width: 15%;">Total Cost</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">30.00</td> <td style="text-align: right;">\$ 3,850.03333</td> <td style="text-align: center;">EA</td> <td style="text-align: center;">0.00 %</td> <td style="text-align: center;">\$ 0.00</td> <td></td> <td style="text-align: center;">\$ 0.00</td> <td style="text-align: center;">\$ 0.00</td> <td style="text-align: right;">\$ 115,501.00</td> </tr> </tbody> </table>		Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost	30.00	\$ 3,850.03333	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 115,501.00
Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost											
30.00	\$ 3,850.03333	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 115,501.00											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 2px;"> <u>LN/FY/Account Code</u>                      1/23/20-100-S1DC- -126-2001-3620- - -1129                 </td> <td style="width: 30%; padding: 2px; text-align: right;"> <u>Dollar Amount</u>                      \$ 115,501.00                 </td> </tr> </table>		<u>LN/FY/Account Code</u> 1/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 115,501.00																
<u>LN/FY/Account Code</u> 1/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 115,501.00																		

Item # 2  
 Class-Item 907-83

Focused Infection Control surveys at ALRs // \$4,950 each // 10 per month

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
30.00	\$ 935.03333	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 28,051.00

<u>LN/FY/Account Code</u> 2/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 28,051.00
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Item # 3  
 Class-Item 907-83

ESRD recertification without Life Safety Code survey // \$13,500 each // 5 per month

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
15.00	\$ 900.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 13,500.00

<u>LN/FY/Account Code</u> 3/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 13,500.00
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Item # 4  
 Class-Item 907-83

Relicensing survey for ALR // \$15,900 each // 5 per month

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
15.00	\$ 0.06667	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 1.00

<u>LN/FY/Account Code</u> 4/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 1.00
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Item # 5  
 Class-Item 907-83

Assisted Living Revisit - Complaint // \$3,750 each // 10 quarterly

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 2,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 22,500.00

<u>LN/FY/Account Code</u> 5/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 22,500.00
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Item # 6  
 Class-Item 907-83

Nursing Home FIC Survey // \$4,950.00 each // 10 quarterly

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 3,959.70	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 39,597.00

<u>LN/FY/Account Code</u> 6/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 39,597.00
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Item # 7  
 Class-Item 907-83

Assisted Living Complaint Survey w/ FIC // \$9,500 each // 5 quarterly

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 5,700.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 28,500.00

<u>LN/FY/Account Code</u> 7/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 28,500.00
--	--------------------------------------

TAX: \$ 0.00  
 FREIGHT: \$ 0.00  
 TOTAL: \$ 247,650.00

APPROVED

By: \_\_\_\_\_  
 Phone#: \_\_\_\_\_

BUYER

State of New Jersey  
 New Jersey Department of  
 Central Procurement (4210)  
 Release Purchase Order  
 90-22-DOH

P.O. Date: 11/28/2022

Blanket Order Number  
  
**22-WAIVE-17179:8**  
  
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VENDOR

Vendor Number: [REDACTED]  
 CertiSurv, LLC  
  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 [REDACTED]  
  
 Vendor Alternate ID: [REDACTED]  
  
 Remit Address:  
 Robert Feurer  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 US  
  
 Email: [REDACTED]

SHIPPING TO BILL TO

[REDACTED]  
 HFEL Administrative Services Fiscal Office  
 120 South Stockton Street Lower Level  
 Trenton, NJ 08611  
 US  
 Email: [REDACTED]  
 [REDACTED]  
  
 [REDACTED]  
 55 North Willow Street  
 TRENTON, NJ 08625-0360  
 US  
 Email: [REDACTED]  
 Phone: [REDACTED]

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ATTN: Contact [REDACTED]

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Item # 1 Class-Item 907-83  ESRD Recertification Survey // \$13500.00 each																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Quantity</th> <th>Unit Price</th> <th>UOM</th> <th>Discount %</th> <th>Total Discount</th> <th>Tax Rate</th> <th>Tax Amount</th> <th>Freight</th> <th>Total Cost</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2.00</td> <td style="text-align: right;">\$ 13,500.00</td> <td style="text-align: center;">EA</td> <td style="text-align: center;">0.00 %</td> <td style="text-align: right;">\$ 0.00</td> <td></td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 27,000.00</td> </tr> </tbody> </table>		Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost	2.00	\$ 13,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 27,000.00
Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost											
2.00	\$ 13,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 27,000.00											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><u>LN/FY/Account Code</u></td> <td style="width: 30%; text-align: right;"><u>Dollar Amount</u></td> </tr> <tr> <td>1/23/20-100-S1DC- -126-2001-3620- - -1129</td> <td style="text-align: right;">\$ 27,000.00</td> </tr> </table>		<u>LN/FY/Account Code</u>	<u>Dollar Amount</u>	1/23/20-100-S1DC- -126-2001-3620- - -1129	\$ 27,000.00														
<u>LN/FY/Account Code</u>	<u>Dollar Amount</u>																		
1/23/20-100-S1DC- -126-2001-3620- - -1129	\$ 27,000.00																		

Item # 2  
Class-Item 907-83

Assisted Living Complaint Survey // \$8,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
8.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 66,000.00

<u>LN/FY/Account Code</u> 2/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 66,000.00
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Item # 3  
Class-Item 907-83

Nursing Home Complaint Survey // \$8,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
1.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 8,250.00

<u>LN/FY/Account Code</u> 3/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 8,250.00
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Item # 4  
Class-Item 907-83

Nursing Home Recertification Survey including LSC // \$38,000 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
1.00	\$ 38,000.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 38,000.00

<u>LN/FY/Account Code</u> 4/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 38,000.00
--	--------------------------------------

TAX: \$ 0.00  
FREIGHT: \$ 0.00  
TOTAL: \$ 139,250.00

APPROVED

By: \_\_\_\_\_  
Phone#: \_\_\_\_\_

BUYER



Item # 2  
Class-Item 907-83

Assisted Living Complaint Survey // \$8,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
8.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 66,000.00

<u>LN/FY/Account Code</u> 2/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 66,000.00
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Item # 3  
Class-Item 907-83

Nursing Home Complaint Survey // \$8,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
1.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 8,250.00

<u>LN/FY/Account Code</u> 3/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 8,250.00
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Item # 4  
Class-Item 907-83

Nursing Home Recertification Survey including LSC // \$38,000 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
1.00	\$ 38,000.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 38,000.00

<u>LN/FY/Account Code</u> 4/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 38,000.00
--	--------------------------------------

TAX: \$ 0.00  
FREIGHT: \$ 0.00  
TOTAL: \$ 139,250.00

APPROVED

By: \_\_\_\_\_  
Phone#: \_\_\_\_\_

BUYER

State of New Jersey  
 New Jersey Department of  
 Central Procurement (4210)  
 Release Purchase Order  
 90-22-DOH

P.O. Date: 4/18/2023

Blanket Order Number  
  
 22-WAIVE-17179:13  
  
 SHOW THIS NUMBER ON ALL  
 PACKAGES, INVOICES AND  
 SHIPPING PAPERS.

Agency Ref. #

VENDOR

Vendor Number: [REDACTED]  
 CertiSurv, LLC  
  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 [REDACTED]  
  
 Vendor Alternate ID: [REDACTED]  
  
 Remit Address:  
 Robert Feurer  
 112 W 7th St. Ste C  
 Columbia, TN 38401  
 US  
  
 Email: [REDACTED]

SHIPPING TO

[REDACTED]  
 HFEL Administrative Services Fiscal Office  
 120 South Stockton Street Lower Level  
 Trenton, NJ 08611  
 US  
 Email: [REDACTED]

BILL TO

[REDACTED]  
 55 North Willow Street  
 TRENTON, NJ 08625-0360  
 US  
 Email: [REDACTED]

INVOICES: Direct invoices in DUPLICATE to the address shown above. TERMS AND CONDITIONS set forth in our Bid or Quotation, on the reverse side hereof or incorporated herein by reference become a part of this

ATTN: Contact [REDACTED]

Account Code: 20-100-S1DC- -126-2001-3620- - -1129  Solicitation (Bid) No.:	Payment Terms: Shipping Terms: Freight Terms: Delivery Calendar Day(s) A.R.O.: 0																		
Item # 1 Class-Item 907-83  NH Complaint Survey // \$8,250 // 25 per quarter																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Quantity</th> <th style="width: 10%;">Unit Price</th> <th style="width: 10%;">UOM</th> <th style="width: 10%;">Discount %</th> <th style="width: 10%;">Total Discount</th> <th style="width: 10%;">Tax Rate</th> <th style="width: 10%;">Tax Amount</th> <th style="width: 10%;">Freight</th> <th style="width: 10%;">Total Cost</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">25.00</td> <td style="text-align: right;">\$ 8,250.00</td> <td style="text-align: center;">EA</td> <td style="text-align: center;">0.00 %</td> <td style="text-align: right;">\$ 0.00</td> <td></td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 206,250.00</td> </tr> </tbody> </table>		Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost	25.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 206,250.00
Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost											
25.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 206,250.00											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 2px;"> <u>LN/FY/Account Code</u>                      1/23/20-100-S1DC- -126-2001-3620- - -1129                 </td> <td style="width: 30%; padding: 2px; text-align: right;"> <u>Dollar Amount</u>                      \$ 206,250.00                 </td> </tr> </table>		<u>LN/FY/Account Code</u> 1/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 206,250.00																
<u>LN/FY/Account Code</u> 1/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 206,250.00																		

Item # 2  
 Class-Item 907-83

ALR FIC survey // \$4,950 // 25 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
25.00	\$ 4,950.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 123,750.00

<u>LN/FY/Account Code</u> 2/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 123,750.00
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Item # 3  
 Class-Item 907-83

ESRD recertification w/out LSC // \$13,500 // 15 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
15.00	\$ 13,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 202,500.00

<u>LN/FY/Account Code</u> 3/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 202,500.00
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Item # 4  
 Class-Item 907-83

ALR Licensing surveys // \$15,900 // 10 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 15,900.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 159,000.00

<u>LN/FY/Account Code</u> 4/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 159,000.00
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Item # 5  
 Class-Item 907-83

ALR Compliant survey w/ FIC // \$9,500 // 15 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
15.00	\$ 9,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 142,500.00

<u>LN/FY/Account Code</u> 5/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 142,500.00
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Item # 6  
 Class-Item 907-83

ALR compliant survey // \$8,250 // 15 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
15.00	\$ 8,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 123,750.00

<u>LN/FY/Account Code</u> 6/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 123,750.00
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Item # 7  
 Class-Item 907-83

ALR Revisit compliant // \$3,750 // 5 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 3,750.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 18,750.00

<u>LN/FY/Account Code</u> 7/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 18,750.00
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Item # 8  
 Class-Item 907-83

NH FIC survey // \$4,950 // 10 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 4,950.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 49,500.00

<u>LN/FY/Account Code</u> 8/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 49,500.00
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Item # 9  
 Class-Item 907-83

NH Recertification survey w/ LSC // \$38,000 // 5 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 38,000.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 190,000.00

<u>LN/FY/Account Code</u> 9/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 190,000.00
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Item # 10  
 Class-Item 907-83

Nursing Home LSC Survey // \$3,250 each

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 3,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 32,500.00

<u>LN/FY/Account Code</u> 10/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 32,500.00
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Item # 11  
 Class-Item 907-83

Nursing Home Compliant survey w/ FIC // \$9,750 each // 10 per quarter

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 9,750.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 97,500.00

<u>LN/FY/Account Code</u> 11/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 97,500.00
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Item # 12  
 Class-Item 907-83

RECERTIFICATION INCLUDING LIFE SAFETY CODE/COMPLAINTS (UP TO 5 WITHIN SAME FACILITY)

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
5.00	\$ 41,500.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 207,500.00

<u>LN/FY/Account Code</u> 12/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 207,500.00
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Item # 13  
 Class-Item 907-83

ASSISTED LIVING LSC SURVEY

Quantity	Unit Price	UOM	Discount %	Total Discount	Tax Rate	Tax Amount	Freight	Total Cost
10.00	\$ 3,250.00	EA	0.00 %	\$ 0.00		\$ 0.00	\$ 0.00	\$ 32,500.00

<u>LN/FY/Account Code</u> 13/23/20-100-S1DC- -126-2001-3620- - -1129	<u>Dollar Amount</u> \$ 32,500.00
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TAX: \$ 0.00  
FREIGHT: \$ 0.00  
TOTAL: \$ 1,586,000.00

APPROVED

By: \_\_\_\_\_

Phone#: \_\_\_\_\_

BUYER

**Request for Proposals**  
**Long Term Care Facilities Surveys Engagement #22-100 (A)**

The Department of Health (“Department” or “DOH”) is looking to engage one (1) or more Contractor(s) to conduct approximately 100 on-site surveys in accordance with State and Federal regulations at Medicare-certified and or State-licensed Acute and Long-Term care Facilities. The surveys shall consist of a combination of Focused Infection Control Surveys, Recertification & Relicensing Inspections with life safety code, Complaint Investigations, and reinspection when appropriate.

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**Proposals Due: Thursday, May 19, 2022, by 3 PM EST**

**Question & Answer Period: Wednesday, May 4, 2022, by 3 PM EST**

All Bidders must submit Proposals to [centralprocurement@doh.nj.gov](mailto:centralprocurement@doh.nj.gov) by the Proposal due date and specified time.

**Contract term: Award Date (TBD) through **June 30, 2023, 12 months.** This timeline may be subject to change.**

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**1.0 Scope of Work:**

The Department of Health (“Department” or “DOH”) is looking to engage one (1) or more Contractor(s) to conduct approximately 100 on-site surveys in accordance with State and Federal regulations at Medicare-certified and or State-licensed Acute and Long-Term care Facilities. The Contractor shall complete the following activities, tasks, obligations, and responsibilities between the contract award date and June 30, 2023, the term of the contract.

**1.1 Contractor Responsibilities:**

The Contractor(s) shall:

- Provide Surveyor Minimum Qualification Test (SMQT) certified staff and Fire Safety Inspector 1 Life Safety Code staff to conduct approximately 100 complaint investigations, recertifications/licensure surveys and COVID-19 focused infection control surveys of facilities with the process outlined by the Centers for Medicare and Medicaid Services (CMS) and applicable federal laws and regulations at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107c05pdf.pdf>  
<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107c06pdf.pdf>

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107c07pdf.pdf> and  
<https://www.cms.gov/files/document/qso-20-38-nh.pdf> .

- Provide any necessary Personal Protective Equipment (PPE) to surveyors working pursuant to the Contract.
- Enter all survey findings into the Automated Survey Processing Environment (ASPEN) shell and submit to NJ no later than five (5) business days from the date of survey completion.
- Submit the CMS Infection Control Tool to DOH along with the CMS-2567 no later than five (5) business days from the date of survey completion.
- Participate in meetings or conference calls, as requested by NJ, to assist in review of survey findings and/or the facility Plan of Correction.
- Notify NJ as soon as possible of any suspected Immediate Jeopardy (IJ) situation in a facility being surveyed and follow procedures set forth in the SOM
- Provide requested documentation and/or testimony regarding enforcement actions as needed to support federal or State counsel in any resulting litigation.
- At the completion of each contracted survey, release to DOH all information, working papers, and reports required by federal and State law used in determining whether participating facilities met federal requirements.
- Adhere to all federal and State requirements, including but not limited to forms, methods, policies and procedures, which are applicable to CMS survey and certification work, as well as federal laws and regulations.
- Refer to and comply with CMS Quality Safety and Oversight (QSO) memoranda released at: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions>.

## 1.2 Surveys

The Contractor shall conduct the following survey activities.

- 1) Focused Infection Control surveys within 3 business days of assignment by DOH  
Surveyors determine whether the facility is implementing proper infection prevention and control practices to prevent the development and transmission of COVID-19 and other communicable diseases and infections.
- 2) Relicensing or recertification surveys using the federal process including life safety code and revisits when appropriate, and
- 3) Complaint investigations and revisits when appropriate.

## 1.3 Survey Criteria

The Contractor shall utilize the following State and Federal criteria in determining and investigating compliance during the survey process.

- 1) Proper infection prevention and control practices (F880, F885, and E0024) to prevent the transmission of COVID-19 and other infections using the Centers for Medicare and Medicaid Services (CMS) Focused Infection Control survey process with a crosswalk to the NJ regulations;

- 2) Medicare Requirements for Participation in the Electronic Code of Federal Regulations (e-CFR) - updated 05/07, [Publication # 100-07 - State Operations Manual](#) and State regulations at N.J.A.C. 8:43F, Standards for Licensure of Adult and Pediatric Day Health Services; N.J.A.C. 8:36, Standards For Licensure of Assisted Living Residences, Comprehensive Personal Care Homes, and Assisted Living Programs; N.J.A.C. 8:39, Standards For Licensure of Long-term Care Facilities; N.J.A.C. 8:43, Standards For Licensure of Residential Health Care Facilities; N.J.A.C. 8:43E, General Licensure Procedures and Enforcement of Licensure Regulations; N.J.A.C. 8:86, Adult and Pediatric Day Health Services; N.J.A.C. 8:43 A, Manual for Standards for Licensing Ambulatory Care Facilities; N.J.A.C. 8:43 G-H Licensing Standards for Hospitals and Rehabilitation Hospitals, respectively.
- 3) Medicare Requirements for Participation in the Electronic Code of Federal Regulations (e-CFR) - updated 05/07, [Publication # 100-07 - State Operations Manual](#) (SOM) using the CMS complaint process with a crosswalk to NJ regulations.

## **2.0 Proposal Submission Requirements**

### **2.1 Proposal Submission**

In order to be considered for an award, the Proposal must be received by the New Jersey Department of Health's (DOH) Central Procurement Unit, electronically through the central e-mail account {centralprocurement@doh.nj.gov } by the required date and time.

The date and time of the Proposal opening are indicated on the RFP cover sheet and on DOH Bidding Opportunities webpage [www.nj.gov/health/mgmt/bids.shtml](http://www.nj.gov/health/mgmt/bids.shtml). If the Proposal opening deadline has been revised, the new Proposal opening deadline shall be shown on the posted Bid Amendment and on [www.nj.gov/health/mgmt/bids.shtml](http://www.nj.gov/health/mgmt/bids.shtml). Proposals not received prior to the Proposal opening deadline shall be rejected.

### **2.2 Experience:**

Bidder(s) shall provide relevant experience on projects of similar size and scope and have direct experience providing services with governmental public health entities. Bidders shall have experience of providing on-site assistance to healthcare facilities, specifically long-term care facilities. Surveyors must be certified Surveyor Minimum Qualifications Tested (SMQT). Detailed resumes should be submitted for all management, supervisory, and key personnel and pool survey staff to be assigned to the Contract. Resumes should emphasize relevant qualifications and experience of these individuals in successfully completing Contracts of a similar size and scope to those required by this RFP.

## 2.3 Pricing:

Bidder shall submit an all-inclusive price based on a survey type: complaint investigation, focused infection control, or biennial licensing survey, and combinations thereof, (for example, focused infection control and complaint investigation at the same time) and shall include all tasks.

Pricing shall be firm fixed pricing. **Firm Fixed Price** means a price that is all-inclusive of direct cost and indirect costs, including, but not limited to, direct labor costs, overhead, fee or profit, clerical support, equipment, materials, supplies, managerial (administrative) support, all documents, reports, forms, travel, reproduction, and any other costs.

Please complete the attached price sheet. If the Bidder is unable to provide a deliverable the corresponding field must be marked as "No Bid".

## 2.4 Technical Proposal Requirements

Bidder shall submit a Technical Proposal, which describes its approach and plans for accomplishing the work outlined in the Scope of Work section, Contractor Responsibilities, Deliverables, Experience, and Pricing, i.e., Sections 1.0 - 2.0. The Bidder shall set forth its understanding of the requirements of this RFP and its approach to successfully complete the contract. The Bidder should include the level of detail it determines necessary to assist the evaluation committee in its review of the Bidder's Proposal.

## 3.0 Proposal Evaluation:

Each criterion will be scored, and each score multiplied by a predetermined weight to develop the Technical Evaluation Score.

Personnel: The qualifications and experience of the Bidder's management, supervisory and key field personnel, and pool survey staff assigned to the contract.

Experience of firm: The Bidder's documented experience in successfully completing contracts of a similar size and scope in relation to the work required by this RFP; and direct experience providing services with governmental public health entities. Contractors shall have the experience of providing on-site assistance to healthcare facilities, specifically long-term care facilities.

Ability of firm to complete the Scope of Work based on its Technical Proposal: The Bidder's demonstration in the Proposal that the Bidder understands the requirements of the Scope of Work and presents an approach that would permit successful performance of the technical requirements of the RFP.

The intent of this RFP is to award a contract(s) to that responsible Bidder(s) whose Proposal(s),

conforming to this RFP is most advantageous to the State, price and other factors considered. Should the Department decide to award to multiple Bidders, it reserves the right to select the number of IPs it will accept from each Bidder.

## **5.0 Required forms:**

### **5.1 FORMS, REGISTRATIONS AND CERTIFICATIONS REQUIRED WITH PROPOSAL**

All required forms are found at the following link:

<https://www.state.nj.us/treasury/purchase/forms.shtml>

#### **All bid submissions should include completed mandatory compliance forms, which include:**

- Ownership Disclosure
- Disclosure of Investigations and Other Actions Involving Contractor
- Disclosure of Investment Activities in Iran
- Chapter 51 Compliance, where applicable
- Chapter 271 form, where applicable
- MacBride Principles
- Source Disclosure
- E.O. 271 Statement or Certification
- Business Registration Certificate
- Affirmative Action Compliance
- Evidence of Insurance
- State of New Jersey Standard Terms and Conditions
- Waivered Contracts Supplement to the State of New Jersey Standard Terms and Conditions
- Certification of Non-Involvement in Prohibited Activities in Russia or Belarus

Bidders are under a continuing obligation to report updates to the information contained in its required forms.

Unless otherwise specified, forms must contain an original, physical signature, or electronic signature.

**Winning Bidder(s) must register with NJSTART as a Contractor for the State of NJ.**

[www.njstart.gov](http://www.njstart.gov)

### **5.2 MACBRIDE PRINCIPLES CERTIFICATION**

Pursuant to N.J.S.A. 52:34-12.2, a Bidder is required to certify that it either has no ongoing business activities in Northern Ireland and does not maintain a physical presence therein or that it will take lawful steps in good faith to conduct any business operations it has in Northern Ireland in accordance with the MacBride principles of nondiscrimination in employment as set forth in N.J.S.A. 52:18A-89.5 and in conformance with the United Kingdom's Fair Employment (Northern Ireland) Act of 1989, and permit independent monitoring of their compliance with those principles.

### **5.3 OWNERSHIP DISCLOSURE FORM**

Pursuant to N.J.S.A. 52:25-24.2, in the event the Bidder is a corporation, partnership, or limited liability company, the Bidder must disclose all 10% or greater owners by (a) completing and submitting the Ownership Disclosure Form with the Proposal; (b) if the Bidder has submitted a signed and accurate Ownership Disclosure Form dated and received no more than six (6) months prior to the Proposal submission deadline for this procurement, the State may rely upon that form; however, if there has been a change in ownership within the last six (6) months, a new Ownership Disclosure Form must be completed, signed and submitted with the Proposal; or, (c) a Bidder with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent or greater beneficial interest. N.J.S.A. 52:25-24.2.

### **5.4 DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**

The Bidder should submit Disclosure of Investment Activities in Iran form to certify that, pursuant to N.J.S.A. 52:32-58, neither the Bidder, nor one (1) of its parents, subsidiaries, and/or affiliates (as defined in N.J.S.A. 52:32-56(e)(3)), is listed on the Department of the Treasury's List of Persons or Entities Engaging in Prohibited Investment Activities in Iran and that neither the Bidder, nor one (1) of its parents, subsidiaries, and/or affiliates, is involved in any of the investment activities set forth in N.J.S.A. 52:32-56(f). If the Bidder is unable to so certify, the Bidder shall provide a detailed and precise description of such activities as directed on the form. If a Bidder does not submit the form with the Proposal, the Bidder shall submit the form prior to contract award.

### **5.5 BUSINESS REGISTRATION**

In accordance with N.J.S.A. 52:32-44(b), a Bidder and its named Subcontractors must have and shall submit valid Business Registration Certificate ("BRC") issued by the Department of the Treasury, Division of Revenue and Enterprise Services prior to the award of a contract. To facilitate the Proposal evaluation and contract award process, the Bidder should submit a copy of its valid BRC and those of any named Subcontractors with its Proposal. See Section 2.1 of the State Standard Terms and Conditions.

Any Bidder, inclusive of any named Subcontractors, not having a valid business registration at the time of the Proposal opening, or whose BRC was revoked prior to the submission of the Proposal, should proceed immediately to register its business or seek reinstatement of a revoked BRC.

The Bidder is cautioned that it may require a significant amount of time to secure the reinstatement of a revoked BRC. The process can require actions by both the Division of Revenue and Enterprise Services and the Division of Taxation. For this reason, a Bidder's early attention to this requirement is highly recommended. The Bidder and its named Subcontractors



may register with the Division of Revenue and Enterprise Services, obtain a copy of an existing BRC or obtain information necessary to seek re-instatement of a revoked BRC online at [https://www1.state.nj.us/TYTR\\_BRC/jsp/BRCLoginJsp.jsp](https://www1.state.nj.us/TYTR_BRC/jsp/BRCLoginJsp.jsp).

A Bidder otherwise identified by the DOH as a responsive and responsible Bidder, inclusive of any named Subcontractors, but that was not business registered at the time of submission of its Proposal must be so registered and in possession of a valid BRC by a deadline to be specified in writing by the DOH. A Bidder failing to comply with this requirement by the deadline specified by the DOH will be deemed ineligible for contract award. Under any circumstance, the DOH will rely upon information available from computerized systems maintained by the State as a basis to verify independently compliance with the requirement for business registration.

## **5.6 DISCLOSURE OF INVESTIGATIONS AND OTHER ACTIONS INVOLVING BIDDER FORM**

The Bidder should submit the Disclosure of Investigations and Other Actions Involving Bidder Form, with its Proposal, to provide a detailed description of any investigation, litigation, including administrative complaints or other administrative proceedings, involving any public sector clients during the past five (5) years, including the nature and status of the investigation, and, for any litigation, the caption of the action, a brief description of the action, the date of inception, current status, and, if applicable, disposition. If a Bidder does not submit the form with the Proposal, the Bidder must comply within seven (7) business days of the State's request, or the State may deem the Proposal non-responsive.

## **5.7 SOURCE DISCLOSURE**

Pursuant to N.J.S.A. 52:34-13.2, prior to an award of a contract, the Bidder is required to submit a completed Source Disclosure Form. The Bidder's inclusion of the completed Source Disclosure Form with the Proposal is requested and advised.

## **5.8 AFFIRMATIVE ACTION**

The intended Contractor must submit a copy of a New Jersey Certificate of Employee Information Report, or a copy of Federal Letter of Approval verifying it is operating under a federally approved or sanctioned Affirmative Action program. Awarded Contractors not in possession of either a New Jersey Certificate of Employee Information Report or a Federal Letter of Approval must complete the Affirmative Action Employee Information Report (AA-302) located on the web at <https://www.state.nj.us/treasury/purchase/forms.shtml>.

Bidders should verify its Affirmative Action Compliance status on the "Maintain Terms and Categories" Tab within its profile in NJSTART. In the event of an issue with a Contractor's Affirmative Action Compliance status, NJSTART provides a link to take corrective action.

## **5.9 INSURANCE CERTIFICATES**

The Contractor shall provide the State with current certificates of insurance for all coverages required by the terms of this contract naming the State as an Additional Insured. See Section 4.2 of the State Standard Terms and Conditions accompanying this Request for Proposal. The Bidder should verify its Insurance Certification Compliance status on the “Maintain Terms and Categories” Tab within its profile in NJSTART.

### **5.10 COVID-19 VACCINE CERTIFICATION**

Please be advised that on October 20, 2021, Governor Murphy signed Executive Order No. 271 which went into effect on that day. In accordance with EO 271, a covered contractor must certify that it has a policy in place:

- (1) that requires all covered workers to provide adequate proof, in accordance with EO 271, to the covered contractor that the covered worker has been fully vaccinated; or
- (2) that requires that unvaccinated covered workers submit to COVID-19 screening testing at minimum one to two times weekly until such time as the covered worker is fully vaccinated; and
- (3) that the covered contractor has a policy for tracking COVID-19 screening test results as required by EO 271 and must report the results to local public health departments.

The requirements of EO 271 apply to all covered contractors and subcontractors, at any tier, providing services, construction, demolition, remediation, removal of hazardous substances, alteration, custom fabrication, repair work, or maintenance work, or a leasehold interest in real property through which covered workers have access to State property. Please review and complete the EO 271 certification and submit it with your Proposal.

### **5.11 CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS**

On March 9, 2022, Governor Murphy signed P.L.2022, c.3, which prohibits certain government dealings with businesses engaged in prohibited activities in Russia or Belarus. The new law requires the Department of the Treasury to develop a list of persons and entities that engage in prohibited activities in Russia or Belarus and an accompanying form for use statewide.

Prior to entering into, renewing, amending, or extending a contract, the intended Contractor must certify that they are not engaged in prohibited activities in Russia or Belarus using the provided Certification Of Non-Involvement In Prohibited Activities In Russia Or Belarus Pursuant To P.L.2022, c.3.

### **6.0 EXECUTIVE ORDER 166 REQUIREMENTS FOR POSTING OF WINNING PROPOSAL AND CONTRACT DOCUMENTS**

Pursuant to Executive Order No. 166, signed by Governor Murphy on July 17, 2020, the Office of the State Comptroller (“OSC”) is required to make all approved State contracts for the allocation and expenditure of COVID-19 Recovery Funds available to the public by posting such contracts on an appropriate State website. Such contracts will be posted on the New Jersey transparency website developed by the Governor’s Disaster Recovery Office (GDRO Transparency Website).

The contract resulting from this [RFP/RFQ] is subject to the requirements of Executive Order No. 166. Accordingly, the OSC will post a copy of the contract, including the [RFP/RFQ], the winning bidder’s proposal and other related contract documents for the above contract on the GDRO Transparency website.

In submitting its proposal, a bidder/proposer may designate specific information as not subject to disclosure. However, such bidder must have a good faith legal or factual basis to assert that such designated portions of its proposal: (i) are proprietary and confidential financial or commercial information or trade secrets; or (ii) must not be disclosed to protect the personal privacy of an identified individual. The location in the proposal of any such designation should be clearly stated in a cover letter, and a redacted copy of the proposal should be provided. A Bidder’s/Proposer’s failure to designate such information as confidential in submitting a bid/proposal shall result in waiver of such claim.

The State reserves the right to make the determination regarding what is proprietary or confidential and will advise the winning bidder/proposer accordingly. The State will not honor any attempt by a winning bidder/proposer to designate its entire proposal as proprietary or confidential and will not honor a claim of copyright protection for an entire proposal. In the event of any challenge to the winning bidder’s/proposer’s assertion of confidentiality with which the State does not concur, the bidder /proposer shall be solely responsible for defending its designation.

**May 13, 2022**

**To: All Interested Vendors {Bidders}**

**Bid Solicitation: Long Term Care Facilities Surveys Engagement #22-100  
(Amendment #2)**

**Quote Submission Due Date: Thursday, May 19, 2022, by 3 PM EST**

**Bid Amendment # 2- Question & Answer**

The following constitutes Bid Amendment #2 to the above-referenced Bid Solicitation:

It is the sole responsibility of the Vendor {Bidder} to be knowledgeable of all the additions, deletions, clarifications, and modifications to the Bid Solicitation and/or the New Jersey Standard Terms and Conditions relative to this Bid Solicitation as outlined in all Bid Amendments.

All other instructions, terms, and conditions of the Bid Solicitation shall remain the same.

#	Bid Solicitation Section Reference	Question (Bolded) and Answer
1	Bid Solicitation Reference  1.1	<p><b>Reference: RFP, Section 1.1 Contractor Responsibilities, pg. 2</b> The RFP states, "Enter all survey findings into the Automated Survey Processing Environment (ASPEN) shell and submit to NJ no later than five (5) business days from the date of survey completion."</p> <p><b>Q: Please clarify, does this requirement apply to all survey types including State surveys?</b></p> <p>A: Yes, state surveys utilize the same guidelines including the infection control tools.</p>
2	Bid Solicitation Reference  1.2  1.3	<p><b>Reference: RFP, Section 1.1 Contractor Responsibilities, pg. 2</b> The RFP states, "Submit the CMS Infection Control Tool to DOH along with the CMS-2567 no later than five (5) business days from the date of survey completion."</p> <p><b>Q: Please clarify, does the CMS Infection Control Tool and CMS-2567 apply to all survey types that include Infection Control?</b></p> <p>A. Yes, they are utilized by all survey types that include infection control.</p>
3	Bid Solicitation Reference	<p><b>Q: Regarding relicensing surveys, for pricing purposes, how long does each of the licensure surveys take and how many surveyors are needed for each?</b></p> <p>A. Please see the attached spreadsheet, information is provided for reference purposes only.</p>

#	Bid Solicitation Section Reference	Question (Bolded) and Answer
4	Bid Solicitation Reference	<p><b>Q. Regarding State surveys, what qualifications are required for the State Licensing surveyors? Are they required to be SMQT certified or have specific CMS training?</b></p> <p>A. In New Jersey, all surveyors in Long-term Care, Assisted Living, Dementia Care Homes and Medical Day Care facilities, are SMQT certified.</p>
5	Bid Solicitation Reference	<p><b>Q: Please clarify, how long does it take for a surveyor to complete the State Licensure training for each survey type and how will the contractor be reimbursed for the cost required to train surveyors?</b></p> <p>A. State licensure training includes two days of training by the state survey team during a survey, followed by another two-day survey where trainees conduct the survey and are evaluated by the state survey team to demonstrate competency. Training costs should be included as part of the flat fee pricing.</p>
6	Bid Solicitation Reference 1.3	<p><b>Reference: RFP, Section 1.3 Surveys Criteria, pg. 2</b></p> <p>The RFP states, "Proper infection prevention and control practices (F880, F885, and E0024) to prevent the transmission of COVID-19 and other infections using the Centers for Medicare and Medicaid Services (CMS) Focused Infection Control survey process with a crosswalk to the NJ regulations".</p> <p><b>Q: Please clarify, is there guidance about how that's done in a Non-LTC environment such as assisted living or memory care facilities?</b></p> <p>A. Assisted Living facilities have infection control tags A1271-A, A1341 and follow EO 283 and 290. Dementia Care Homes follow EO 283 and 290.</p>
7	Bid Solicitation Reference 2.2	<p><b>Q. Is the contractor expected to provide remote assistance, education, and training to facilities on infection prevention and control of COVID-19 under this contract (it isn't included in the Scope of Work or Contractor Responsibilities)?</b></p> <p>A. No, there is no remote assistance, education, or training to be provided to facilities. Please see amendment 3</p>

8	Bid Solicitation Reference 2.2	<p><b>Q. How should the remote assistance, education, and training to facilities on infection prevention and control of COVID-19 be priced since it isn't a normal part of the survey process?</b></p> <p>A. No, there is no remote assistance, education, or training to be provided to facilities. Please see amendment 3</p>
9	Bid Solicitation Reference 2.2	<p><b>Q. Providing remote assistance, education, and training to a facility on infection prevention and control of COVID-19 while conducting surveys of those facilities may present a real or perceived Conflict of Interest (COI). Would NJDOH please confirm we will not be asked to provide remote assistance, education, and training as part of the survey process.</b></p> <p>A. No, there is no remote assistance, education, or training to be provided to facilities. Please see amendment 3 ”</p>
10	Bid Solicitation Reference 2.2	<p><b>Reference: RFP, Section 2.2 Experience, pg. 3</b>          The RFP states, “Contractors shall have the experience of providing on-site assistance to healthcare facilities, specifically long-term care facilities.”</p> <p><b>Q. What type of onsite assistance to healthcare facilities (LTC) is this requirement intended to address? Is this experience conducting onsite surveys, or providing some other type of assistance such as education and/or training?</b></p> <p>A. No, there is no remote assistance, education, or training to be provided to facilities. Please see amendment 3 ”</p>
11	Bid Solicitation Reference 2.2	<p><b>Reference: RFP, Section 2.2 Experience, pg. 3</b>          The RFP states, “Contractors shall have the experience of providing on-site assistance to healthcare facilities, specifically long-term care facilities.”</p> <p><b>Q. Providing onsite assistance while conducting surveys of those facilities may present a real or perceived Conflict of Interest (COI). Would NJDOH please confirm the contractor will not be asked to conduct onsite assistance to healthcare facilities, especially LTC, as part of the survey process?</b></p> <p>A. No, there is no remote assistance, education, or training to be provided to facilities. Please see amendment 3 ”</p>

12	Bid Solicitation Reference 2.2	<p><b>Q. Do all surveyors, including those doing licensure/state surveys or ESRD surveys, have to be SMQT certified or is this requirement for LTC surveyors only?</b></p> <p>A. In New Jersey, all surveyors in Long-term Care, Assisted Living, Dementia Care Homes and Medical Day Care facilities, are SMQT certified. There is no federal requirement for SMQT for acute care, including ESRD. However, although there is no certification required, ESRD is very technical, and ESRD Core survey experience is required.</p>
13	Bid Solicitation Reference 2.2	<p><b>Q. Are remote assistance for facilities and education and training for infection prevention and control of COVID-19 required to be performed by the contractor?</b></p> <p>A. There is no remote assistance, education or training for infection prevention and control of COVID-19 to be provided by the contractor. Please see amendment 3</p>
14	Bid Solicitation Reference 2.2	<p><b>Q. If so, how should this task be priced since it is not listed on the supplied pricing sheet, and it is not in Section 1.0 Scope of Work or Section 2.0 Proposal Submission Requirement?</b></p> <p>A. There is no remote assistance, education, or training to be performed by the contractor. Please see amendment 3</p>
15	Bid Solicitation Reference 2.3	<p><b>Q. If pricing is required to be firm fixed price, why is the hourly rate for each FTE required? How would the hourly rate be used for billing purposes?</b></p> <p>A. Please see amendment 3</p>
16	Bid Solicitation Reference 3.0	<p><b>Q. The pricing sheet does not include providing these services to facilities. Would NJDOH please clarify what is the purpose/relevance of this experience?</b></p> <p>A. Assistance can be provided with clarification or interpretation of regulations; however, surveyors cannot be prescriptive.</p>
17	Bid Solicitation Reference 2.3	<p><b>Q. Section 2.3 states that pricing shall be firm fixed pricing, inclusive of all expenses including travel. Additionally, the price sheet states the cost for each deliverable should be “complete” and all inclusive. However, the last statement of the 2nd paragraph states, “please base pricing on an all-inclusive hourly rate per FTE”. Please clarify if the price sheet should include a fixed, all-inclusive price per deliverable, or an hourly rate that includes all expenses (travel, etc.).</b></p> <p>A. Please see amendment 3</p>



**May 13, 2022**

**To: All Interested Vendors {Bidders}**

**Bid Solicitation: Long Term Care Facilities Surveys Engagement #22-100  
(Amendment #3)**

**Quote Submission Due Date: Thursday, May 19, 2022, by 3 PM EST**

**Bid Amendment # 3 – SOW Correction**

The following constitutes Bid Amendment #3 to the above-referenced Bid Solicitation:

It is the sole responsibility of the Vendor {Bidder} to be knowledgeable of all the additions, deletions, clarifications, and modifications to the Bid Solicitation and/or the New Jersey Standard Terms and Conditions relative to this Bid Solicitation as outlined in all Bid Amendments.

All other instructions, terms, and conditions of the Bid Solicitation shall remain the same.

#	Bid Solicitation Section Reference	Correction / Modification
1	Bid Solicitation Reference  2.2	<p><b>RFP, Section 2.2 Experience, pg. 3</b></p> <p>The RFP states, "The Bidder's shall provide the capacity and relevant experience to provide remote assistance to facilities as well as education and training pertaining to infection prevention and control of COVID-19."</p> <p><b>**Deleted sentence not relevant to this RFP**</b></p>
2	Bid Solicitation Reference  2.3	<p><b>RFP, Section 2.3 Pricing, pg. 4</b></p> <p>The RFP states, "For billing purposes, please base pricing on an all-inclusive hourly rate per FTE."</p> <p><b>**Deleted sentence not relevant to this RFP**</b></p>
3	Bid Solicitation Reference  3.0	<p><b>RFP, Section 3.0 Proposal Evaluation, pg. 4</b></p> <p>The RFP states, "Bidder's capacity and relevant experience to provide remote assistance to facilities as well as education and training pertaining to infection prevention and control of COVID-19."</p> <p><b>**Deleted sentence not relevant to this RFP**</b></p>



Central Procurement  
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May 11<sup>th</sup>, 2022

To: NJDOH

CertiSurv is excited to provide the following proposal in response to Engagement #22-100(A), RFP for Acute and Long-Term Care Facilities Surveys, published on April 29<sup>th</sup>, 2022. CertiSurv can provide the services needed to ensure an excellent outcome for this project at competitive prices. We have enjoyed working with NJDOH thus far and look forward to continuing our excellent working relationship with NJDOH over the coming year. Following this cover page, you will find all items requested in the RFP.

If there are any questions, or additional information is needed, please contact me directly at any time.

A handwritten signature in black ink that reads "Robert Feurer".

Robert Feurer  
CEO

112 W 7<sup>th</sup> St. Ste C  
Columbia, TN 38401



# Acute and Long-Term Care Facilities Surveys Proposal

## Introduction

CertiSurv, LLC is providing this proposal to demonstrate its qualifications and abilities to provide survey services for Medicare-certified, Federal, and State-licensed Acute and Long-Term Care facilities as requested by the New Jersey Department of Health in the RFP published on April 29<sup>th</sup>, 2022, referred to as Engagement #22-100(A). This proposal will provide answers, agreements, and acknowledgements of all the items requested in the RFP.

## Scope of Work

CertiSurv shall provide qualified staff to complete the following actions, tasks, obligations, and responsibilities between the date of contract award through the end of the contract, currently expected to be June 30, 2023.

- 1) COVID-19 Focused Infection Control Surveys within 3 business days of assignment by DOH
- 2) Relicensing or recertification surveys using the federal process including life safety code and revisits when appropriate
- 3) Complaint investigations and revisits when appropriate

CertiSurv shall utilize the State and Federal criteria list in section 1.3, items 1-3, in the RFP to determine and investigate compliance during the survey process.

For all the survey types mentioned in the RFP and amendments, and any additional survey types subsequently added to the Contract, CertiSurv will meet the expectations and responsibilities listed below.

CertiSurv will provide SMQT certified staff and Fire Safety Inspector 1 Life Safety Code staff to conduct up to 100 complaint investigations, recertifications/licensure surveys, and COVID-19 focused infection control surveys of facilities with the process outlined by the Centers for Medicare and Medicaid Services (CMS) and applicable federal laws and regulations.

CertiSurv will provide any necessary Personal Protective Equipment (PPE) to surveyors.

All survey findings will be entered into the ASPEN shell and submitted to New Jersey no later than five (5) business days from the date of survey completion.

The CMS Infection Control Tool and CMS-2567 will be submitted to DOH no later than five (5) business days from the date of survey completion.

CertiSurv will participate in meetings or conference calls, as requested by NJ, to assist in the review of survey findings and/or facility Plans of Correction.

CertiSurv will notify NJ as soon as possible of any suspected Immediate Jeopardy (IJ) situations and follow procedures set forth in the State Operations Manual (SOM).

CertiSurv will provide requested documentation and/or testimony regarding enforcement actions as needed to support federal or State counsel in any resulting litigation.

At the completion of each survey, CertiSurv will release to DOH all information, working papers, and reports required by federal and State law used in determining whether participating facilities met federal requirements.

CertiSurv will adhere to all federal and State requirements, including but not limited to forms, methods, policies, and procedures, which are applicable to CMS survey and certification work, as well as federal and state laws and regulations.

CertiSurv will refer to and comply with CMS Quality Safety and Oversight (QSO) memoranda released.

## Experience

### *Company History and Overview*

CertiSurv provides certification and survey services to Health Facility Survey Agencies across the United States for both Long-Term and Non-Long-Term facilities and programs. This includes recertification, complaint, infection control, revisit, and other types of surveys. Additionally, CertiSurv provides IDR review services for providers in certain states. CertiSurv also develops occupational certification technology systems for governmental agencies, corporations, and individuals.

CertiSurv began operations in August 2019. The current CEO, Robert Feurer, and several key staff members had previously worked together at a similar firm known as Providigm and CertiSurv is in many ways a continuation of Providigm.

From 2007 – 2012, Providigm was contracted by CMS to train state agencies across the US in the Quality Indicator Survey (QIS) process. Over the course of those five years, Providigm trained over half of the states in the QIS process. After the CMS contract was ended, Providigm began providing survey services to state agencies, under the direction of Robert Feurer who was the Chief Financial Officer at Providigm.

In January 2019, Providigm was acquired by HealthStream, Inc. Because HealthStream did not desire to continue working with state agencies, Mr. Feurer and other Providigm staff left HealthStream to create CertiSurv as a continuation of the work Providigm had been doing in the regulatory space since 2007. CertiSurv was able to immediately secure a contract to perform surveys in South Carolina and has continue to add client states since then.

### *Comparative Projects*

Recent projects of similar size and scope to this proposal include:

- Working with the state of South Carolina since October of 2019 conducting recertification, infection control, complaint, and initial surveys of long-term care, acute care, and ICF facilities
- Working with the state of Kansas since January 2020 conducting surveys of various non-long term care facilities
- Working with the state of New Jersey since June 2020 conducting recertification, complaint and focused infection control surveys of long-term care facilities, recertification, complaint and focused infection control surveys of assisted living facilities, recertification surveys of end stage renal disease clinics, and inspections of psychiatric hospitals
- Working with the state of Texas since June 2021 conducting recertification and complaint surveys of long-term care facilities
- Working with the state of Kentucky since July 2021 conducting recertification surveys of long-term care facilities
- Working with the state of Alabama since December 2021 conducting recertification and complaint surveys of long-term care and ICF facilities.
- Working with the state of Nebraska in 2020 and 2021 conducting recertification, infection control and complaint surveys of long-term care facilities, critical access hospitals and end stage renal disease clinics.
- Working with the state of Georgia since March 2022 conducting recertification surveys of long-term care and various intermediate and acute care facilities.
- Working with the state of Iowa since May 2022 conducting recertification surveys of long-term care facilities
- Working with the state of Colorado since May 2022 conducting recertification surveys of long-term care facilities.

As mentioned in the list above, CertiSurv has worked with NJDOH since June 2020 and is continuing to perform surveys as of the date of this proposal submission. In that time, CertiSurv has performed over 650 surveys for NJDOH. During this time, the management team and surveyors at CertiSurv have worked closely with the survey managers at NJDOH. Because of this, CertiSurv is already familiar with the systems, methods, and survey documentation preferences of the NJDOH survey team. Additionally, CertiSurv staff have already been trained by NJDOH to perform surveys of state-licensed facilities.

Compared to other bidders, this means that, if awarded this contract, CertiSurv will be able to immediately continue the work already being done without the need for any additional training or logistical delays.

CertiSurv is capable to meet the demands of the workload requested in the RFP, as well as any additional work that arises that would be covered by this contract. CertiSurv maintains a national pool of surveyors that can easily be shifted to a high demand area. This ensures that any unexpected deadlines or issues that the NJDOH survey team encounters can be met quickly by the CertiSurv team.

Additional information about CertiSurv's state agency services can be found by visiting the CertiSurv website at <https://certisurv.com/state-agencies>.

## Personnel

CertiSurv's long-term care surveyor staff assigned to this project are all SMQT qualified and have all worked for a state agency prior to working with CertiSurv. Several CertiSurv surveyors have over 15 years of experiences. CertiSurv also maintains an internal training and review system to ensure that surveyors are familiar with current regulations and surveyor processes. This system also identifies surveyors that are performing below CertiSurv's high standards and allows corrections to be made to any issues with their survey methods. CertiSurv also performs a multi-level internal Quality Assurance review of each survey that is completed. This ensures that once the survey results are returned to the state, the survey moves through the state agency process with minimal need for revision or correction. This saves time and resources that the state agency can utilize on other tasks.

The CertiSurv senior staff have a long history of working with CMS, state agencies and healthcare providers. They are all mission driven to improve the quality of care in all facilities, while maintaining a courteous and professional working relationship with the staff of the facilities being surveyed.

The staff currently expected to be allocated to this project, and their positions, are listed in the table below. Resumes and SMQT evidence for these staff members are included as Attachment 15 and 16, respectively. CertiSurv continuously adds new surveyors therefore some surveyors not currently listed may be assigned to this contract in the future.

## Staff List

<b>Name</b>	<b>Discipline</b>	<b>Project Role</b>
Jessica Lima	Registered Nurse	Director
Tim Pickens	Registered Nurse	Supervisor
Patrick Campbell	Registered Nurse	Surveyor Trainer
Adewale Omobalogun	Physical Therapist	Surveyor
Aletha Bigham	Registered Nurse	Surveyor
Amanda Smith	Registered Nurse	Surveyor
Annette Furr	Registered Dietician	Surveyor
April Munn	Generalist	Surveyor/LSC
Ashely Wilson	Generalist	Surveyor
Aubrey Heim	Registered Nurse	Surveyor
Bec Health	Generalist	Surveyor
Becky Richardson	Registered Nurse	Surveyor
Betsy Strader	Registered Dietician	Surveyor
Betsy Tebo	Registered Nurse	Surveyor
Carla Roberts	Registered Nurse	Surveyor
Carrie Burney	Registered Nurse	Surveyor
Carrie Storms	Registered Nurse	Surveyor
Charlene Clay	Registered Nurse	Surveyor
Cynthia Hernandez	Registered Nurse	Surveyor
Denise Rogers-Murray	Registered Dietician	Surveyor
Ed Roth	Social Worker	Surveyor
Ester Levyash	Registered Nurse	Surveyor
Gay Henderson	Registered Nurse	Surveyor
Gina Campbell	Registered Nurse	Surveyor
Heather DeVooght	Social Worker	Surveyor
Jennifer Kosar	Registered Nurse	Surveyor
Juliane Wardell	Generalist	Surveyor
Kate Heath	Generalist	Surveyor
Kathleen McDermott	Registered Nurse	Surveyor
Kathy Drake	Registered Nurse	Surveyor
Katie Bright	Registered Dietician	Surveyor
Kimberly Nichols	Generalist	Surveyor
Kyle Culberson	Generalist	Surveyor
Laura DeWan	Registered Nurse	Surveyor
Lea Ann Howell	Registered Nurse	Surveyor
Linda Juma	Social Worker	Surveyor



### Staff List (continued)

<b>Name</b>	<b>Discipline</b>	<b>Project Role</b>
Lori Anderson	Registered Nurse	Surveyor
Margaret Anderson	Generalist	Surveyor
Marilyn Klotz	Registered Nurse	Surveyor
Mary Maas	Registered Nurse	Surveyor
Melanie Bradford	Registered Nurse	Surveyor
Melissa Mrotek	Social Worker	Surveyor
Melissa Slaughter	Registered Nurse	Surveyor
Miranda Nixon	Social Worker	Surveyor
Monica Burnham	Registered Nurse	Surveyor
Nancy Mullins	Registered Nurse	Surveyor
Patricia Gonzales	Pharmacist	Surveyor
Paula Higgs	Registered Nurse	Surveyor
Rachele Kemp	Licensed Practical Nurse	Surveyor
Renee Cummins	Registered Nurse	Surveyor
Rhonda Rodriguez	Registered Nurse	Surveyor
Seena Redan	Nursing Home Admin	Surveyor
Sherry Green	Registered Nurse	Surveyor
Sherry Reid	Registered Nurse	Surveyor
Susan Gosney	Registered Nurse	Surveyor
Susan Harrison	Registered Nurse	Surveyor
Sylvia Rather	Registered Nurse	Surveyor
Tamesha Chambers	Registered Nurse	Surveyor
Teresa Radcliffe	Registered Nurse	Surveyor
Theresa Henkel	Registered Nurse	Surveyor
Tiffany Knapil	Registered Nurse	Surveyor
Tracye Howse	Registered Nurse	Surveyor
Wendy Stanbro	Registered Nurse	Surveyor
Alisia Dunn	Registered Nurse	QA Reviewer
Cheryl Romanow	Registered Nurse	QA Reviewer
Donetta Ball	Registered Nurse	QA Reviewer
Elise Foard	Registered Nurse	QA Reviewer
Kayla Harwell	Social Worker	QA Reviewer
Lori Hobbs	Registered Nurse	QA Reviewer
Michelle Seigrist	Registered Nurse	QA Reviewer
Sandy Goins	Registered Nurse	QA Reviewer

## References

Although not requested in the RFP, the following references are being provided for additional validation of CertiSurv's qualifications and abilities to perform the survey services in this proposal.

New Jersey Department of Health, Health Facility Survey & Field Operations  
Donna Koller, Program Manager – LTC Complaints

[REDACTED]

New Jersey Department of Health, Health Facility Survey & Field Operations  
Kimberly Hansen, Program Manager – Acute Care

[REDACTED]

South Carolina DHEC, Healthcare Quality  
Mary Jo Roue

[REDACTED]

Nebraska Department of Health and Human Services  
Heidi Burklund, Licensure Support Program Manager

[REDACTED]

## Pricing

Pricing shall be determined based on survey and facility type as listed on the price sheets included as Attachment 1. CertiSurv will provide an invoice to New Jersey each month for the surveys performed the prior month. All prices listed are Firm Fixed and all-inclusive of direct costs and indirect costs, including, but not limited to, direct labor costs, overhead, fee or profit, clerical support, equipment, materials, supplies, managerial (administrative) support, all documents, reports, forms, travel, reproduction, and any other costs.

## Required Forms

All required forms requested in the RFP have been included as Attachments. The list of attachments is provided below. CertiSurv is currently registered as a vendor with NJSTART.

Attachment 1 – Survey Pricing Sheet

Attachment 2 – State of New Jersey Standard Terms and Conditions

Attachment 3 – Waivered Contracts Supplement to the State of New Jersey Standard Terms and Conditions

Attachment 4 – Ownership Disclosure Form

Attachment 5 – Disclosure of Investigations and Other Actions Involving Vendor

Attachment 6 – Disclosure of Investment Activities in Iran Form

Attachment 7 – Two-Year Chapter 51/Executive Order 117 Vendor Certification and Disclosure of Political Contributions

Attachment 8 – Chapter 271 Vendor Certification and Political Disclosure Form

Attachment 9 – MacBride Principles Form

Attachment 10 – Business Registration

Attachment 11 – Certificate of Insurance

Attachment 12 – Source Disclosure Form

Attachment 13 – New Jersey Certificate of Employee Information Report

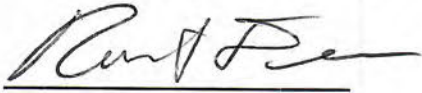
Attachment 14 – Certification of Non-involvement in Prohibited Activities in Russia or Belarus

Attachment 15 – Staff Resumes

Attachment 16 – SMQT Evidence

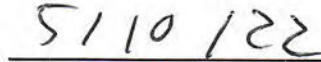
## Signature

This proposal is authorized, agreed to, and signed by Robert Feurer as listed below.



Robert Feurer

Robert Feurer, CEO  
CertiSurv, LLC



5/10/22

Date

## Attachment 1

### Survey Pricing Sheet

Please find pricing for all survey and facility types listed on the following two pages.

State							
Price Line	Survey Type	Assisted Living Residence	Assisted Living Programs	Certified Personal Care Homes	Dementia Care Homes	Medical Day Care Programs (Adult & Pediatric)	Hospitals
	Individual						
1	Additional Surveyor	N/A	N/A	N/A	N/A	N/A	N/A
2	Complaint (up to 5 intakes per Facility)	\$8,250.00	N/A	N/A	N/A	N/A	\$7,950.00
3	Focused Infection Control (FIC)	\$4,950.00	\$4,950.00	\$4,950.00	\$4,950.00	\$4,950.00	N/A
4	Informal Dispute Resolution (IDR)	\$1,250.00	\$1,250.00	\$1,250.00	\$1,250.00	\$1,250.00	\$1,250.00
5	Relicense including Life Safety Code (LSC)	\$15,900.00	\$14,900.00	\$15,900.00	\$15,900.00	\$15,900.00	N/A
6	Relicense without Life Safety Code (LSC)	\$12,900.00	\$11,900.00	\$12,900.00	\$12,900.00	\$12,900.00	N/A
7	Revisit - Complaint (up to 5 intakes per Facility)	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00
8	Revisit - Focused Infection Control (FIC)	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	N/A
9	Revisit - Relicense including LSC	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	N/A
10	Revisit - Relicense without LSC	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	N/A
11	Life Safety Code (LSC)	\$3,250.00	N/A	\$3,250.00	\$3,250.00	\$3,250.00	N/A
12	Revisit - Life Safety Code (LSC)	\$2,750.00	N/A	\$2,750.00	\$2,750.00	\$2,750.00	N/A
	<b>Bundled</b>						
13	Relicense including Life Safety Code / Complaints (up to 5 intakes per facility) / Focused Infection Control	\$21,500.00	\$19,500.00	\$21,500.00	\$21,500.00	\$21,500.00	N/A
14	Relicense including Life Safety Code / Focused Infection Control	\$17,900.00	\$16,900.00	\$17,900.00	\$17,900.00	\$17,900.00	N/A
15	Relicense including Life Safety Code / Complaints (up to 5 intakes per Facility)	\$17,900.00	\$16,900.00	\$17,900.00	\$17,900.00	\$17,900.00	N/A
16	Complaint / Focused Infection Control	\$9,500.00	\$9,500.00	\$9,500.00	\$9,500.00	\$9,500.00	N/A
17	Revisit - Relicense including Life Safety Code / Complaints (up to 5 intakes per Facility) / Focused Infection Control	N/A	N/A	N/A	N/A	N/A	N/A
18	Revisit - Relicense including Life Safety Code / Focused Infection Control	N/A	N/A	N/A	N/A	N/A	N/A
19	Revisit - Relicense including Life Safety Code / Complaints (up to 5 intakes per Facility)	N/A	N/A	N/A	N/A	N/A	N/A
20	Revisit - Complaint / Focused Infection Control	N/A	N/A	N/A	N/A	N/A	N/A
21	Relicense without Life Safety Code / Complaints (up to 5 intakes per Facility) / Focused Infection Control	\$16,900.00	\$16,900.00	\$16,900.00	\$16,900.00	\$16,900.00	N/A
22	Relicense without Life Safety Code / Focused Infection Control	\$14,250.00	\$14,250.00	\$14,250.00	\$14,250.00	\$14,250.00	N/A
23	Relicense without Life Safety Code / Complaints (up to 5 intakes per Facility)	\$15,500.00	\$15,500.00	\$15,500.00	\$15,500.00	\$15,500.00	N/A
24	Revisit - Relicense without Life Safety CodeC / Complaints (up to 5 intakes per Facility) / Focused Infection Control	N/A	N/A	N/A	N/A	N/A	N/A
25	Revisit - Relicense without Life Safety Code / Focused Infection Control	N/A	N/A	N/A	N/A	N/A	N/A
26	Revisit - Relicense without Life Safety Code / Complaints (up to 5 intakes per Facility)	N/A	N/A	N/A	N/A	N/A	N/A

Federal							
Price Line	Survey Type	Nursing Home	Hospitals	Ambulatory Surgery Center	End-Stage Renal Dialysis Facilities	Home Health Agencies	Hospice Facilities and Branches
	Individual						
1	Additional Surveyor	N/A	N/A	N/A	N/A	N/A	N/A
2	Complaint (up to 5 intakes with same Facility)	\$8,250.00	N/A	\$7,950.00	\$8,450.00	\$7,950.00	\$7,950.00
3	Focused Infection Control (FIC)	\$4,950.00	N/A	N/A	N/A	N/A	N/A
4	Informal Dispute Resolution (IDR) and Independent Informal Dispute Resolution (IIDR)	\$1,250.00	\$1,250.00	\$1,250.00	\$1,250.00	\$1,250.00	\$1,250.00
5	Life Safety Code (LSC)	\$3,250.00	N/A	N/A	N/A	N/A	N/A
6	Recertification including LSC	\$38,000.00	N/A	\$15,500.00	N/A	N/A	N/A
7	Recertification without LSC	\$35,000.00	N/A	\$13,500.00	\$13,500.00	\$13,500.00	\$13,500.00
8	Revisit - Complaint (up to five intakes per Facility)	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00
9	Revisit - Focused Infection Control (FIC)	\$3,750.00	N/A	N/A	N/A	N/A	N/A
10	Revisit - Life Safety Code (LSC)	\$2,750.00	N/A	N/A	N/A	N/A	N/A
11	Revisit - Recertification including LSC	\$7,750.00	N/A	\$3,750.00	N/A	N/A	N/A
12	Revisit - Recertification without LSC	\$7,750.00	N/A	\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00
	<b>Bundled</b>						
13	Recertification including Life Safety Code / Complaints (up to 5 within same Facility) / Focused Infection Control	\$42,750.00	N/A	N/A	N/A	N/A	N/A
14	Recertification including Life Safety Code/ Focused Infection Control	\$41,500.00	N/A	N/A	N/A	N/A	N/A
15	Recertification including Life Safety Code / Complaints (up to 5 within same Facility)	\$41,500.00	N/A	\$18,500.00	N/A	N/A	N/A
16	Complaint / Focused Infection Control	\$9,750.00	N/A	N/A	N/A	N/A	N/A
17	Revisit - Recertification including Life Safety Code/ Complaints (up to 5 within same Facility) / Focused Infection Control	\$11,750.00	N/A	N/A	N/A	N/A	N/A
18	Revisit - Recertification including Life Safety Code / Focused Infection Control	\$9,750.00	N/A	N/A	N/A	N/A	N/A
19	Revisit - Recertification including Life Safety Code/ Complaints (up to 5 within same Facility)	N/A	N/A	\$4,750.00	N/A	N/A	N/A
20	Revisit - Complaint / Focused Infection Control	\$5,950.00	N/A	N/A	N/A	N/A	N/A
21	Recertification without Life Safety Code / Complaints (up to 5 same Facility)	\$37,000.00	N/A	\$16,500.00	\$16,500.00	\$16,500.00	\$16,500.00
22	Revisit - Recertification without LSC/ Complaints (up to 5 same Facility)	N/A	N/A	\$8,950.00	\$8,950.00	\$8,950.00	\$8,950.00

## Attachment 2

### State of New Jersey Standard Terms and Conditions

Please see attachment following this page.





# State of New Jersey Standard Terms and Conditions

(Revised December 13, 2021)

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY  
33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

## 1.0 STANDARD TERMS AND CONDITIONS APPLICABLE TO THE CONTRACT

The following terms and conditions shall apply to all contracts or purchase agreements made with the State of New Jersey. The State's terms and conditions shall prevail over any conflicts set forth in a Contractor's Quote or Proposal.

## 2.0 STATE LAW REQUIRING MANDATORY COMPLIANCE BY ALL CONTRACTORS

The statutes, laws, regulations or codes cited herein are available for review at the [New Jersey State Library](#), 185 West State Street, Trenton, New Jersey 08625.

### 2.1 BUSINESS REGISTRATION

Pursuant to N.J.S.A. 52:32-44, the State is prohibited from entering into a contract with an entity unless the Contractor and each subcontractor named in the proposal have a valid Business Registration Certificate on file with the Division of Revenue and Enterprise Services. A subcontractor named in a bid or other proposal shall provide a copy of its business registration to the Contractor who shall provide it to the State.

The contractor shall maintain and submit to the State a list of subcontractors and their addresses that may be updated from time to time with the prior written consent of the Director during the course of contract performance. The contractor shall submit to the State a complete and accurate list of all subcontractors used and their addresses before final payment is made under the contract.

Pursuant to N.J.S.A. 54:49-4.1, a business organization that fails to provide a copy of a business registration, or that provides false business registration information, shall be liable for a penalty of \$25 for each day of violation, not to exceed \$50,000 for each business registration copy not properly provided under a contract with a contracting agency.

The contractor and any subcontractor providing goods or performing services under the contract, and each of their affiliates, shall, during the term of the contract, collect and remit to the Director of the Division of Taxation in the Department of the Treasury, the Use Tax due pursuant to the "Sales and Use Tax Act, P.L. 1966, c. 30 (N.J.S.A. 54:32B-1 *et seq.*) on all sales of tangible personal property delivered into the State. Any questions in this regard can be directed to the Division of Revenue at (609) 292-1730. Form NJ-REG can be filed online at <http://www.state.nj.us/treasury/revenue/busregcert.shtml>.

### 2.2 OWNERSHIP DISCLOSURE

Pursuant to N.J.S.A. 52:25-24.2, in the event the Contractor is a corporation, partnership or limited liability company, the Contractor must complete an Ownership Disclosure Form.

A current completed Ownership Disclosure Form must be received prior to or accompany the submitted Quote. A Contractor's failure to submit the completed and signed form prior to or with its Quote will result in the Contractor being ineligible for a Contract award, unless the Division has on file a signed and accurate Ownership Disclosure Form dated and received no more than six (6) months prior to the Quote submission deadline for this procurement. If any ownership change has occurred within the last six (6) months, a new Ownership Disclosure Form must be completed, signed and submitted with the Quote.

In the alternative, a Contractor with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent or greater beneficial interest. N.J.S.A. 52:25-24.2.

### 2.3 DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

Pursuant to N.J.S.A. 52:32-58, the Contractor must utilize this Disclosure of Investment Activities in Iran form to certify that neither the Contractor, nor one (1) of its parents, subsidiaries, and/or affiliates (as defined in N.J.S.A. 52:32-56(e)(3)), is listed on the Department of the Treasury's List of Persons or Entities Engaging in Prohibited Investment Activities in Iran and that neither the Contractor, nor one (1) of its parents, subsidiaries, and/or affiliates, is involved in any of the investment activities set forth in N.J.S.A. 52:32-56(f). If the Contractor is unable to so certify, the Contractor shall provide a detailed and precise description of such activities as directed on the form. A Contractor's failure to submit the completed and signed form will preclude the award of a Contract to said Contractor.

### 2.4 ANTI-DISCRIMINATION

All parties to any contract with the State agree not to discriminate in employment and agree to abide by all anti-discrimination laws including those contained within N.J.S.A. 10:2-1 through N.J.S.A. 10:2-4, N.J.S.A. 10:5-1 *et seq.* and N.J.S.A. 10:5-31 through 10:5-38, and all rules and regulations issued thereunder are hereby incorporated by reference. The agreement to abide by the provisions of N.J.S.A. 10:5-31 through 10:5-38 include those provisions indicated for Goods, Professional Service and General Service Contracts (Exhibit A, attached) and Constructions

Contracts (Exhibit B and Exhibit C - Executive Order 151 Requirements) as appropriate.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time.

## 2.5 AFFIRMATIVE ACTION

In accordance with N.J.A.C. 17:27-1.1, prior to award, the Contractor and subcontractor must submit a copy of a New Jersey Certificate of Employee Information Report, or a copy of Federal Letter of Approval verifying it is operating under a federally approved or sanctioned Affirmative Action program. Contractors or subcontractors not in possession of either a New Jersey Certificate of Employee Information Report or a Federal Letter of Approval must complete the Affirmative Action Employee Information Report (AA-302) located on the web at [https://www.state.nj.us/treasury/contract\\_compliance/](https://www.state.nj.us/treasury/contract_compliance/).

## 2.6 AMERICANS WITH DISABILITIES ACT

The contractor must comply with all provisions of the Americans with Disabilities Act (ADA), P.L. 101-336, in accordance with 42 U.S.C. 12101, et seq.

## 2.7 MACBRIDE PRINCIPLES

The Contractor must certify pursuant to N.J.S.A. 52:34-12.2 that it either has no ongoing business activities in Northern Ireland and does not maintain a physical presence therein or that it will take lawful steps in good faith to conduct any business operations it has in Northern Ireland in accordance with the MacBride principles of nondiscrimination in employment as set forth in N.J.S.A. 52:18A-89.5 and in conformance with the United Kingdom's Fair Employment (Northern Ireland) Act of 1989, and permit independent monitoring of their compliance with those principles.

## 2.8 PAY TO PLAY PROHIBITIONS

Pursuant to N.J.S.A. 19:44A-20.13 et seq. (P.L. 2005, c. 51), The State shall not enter into a Contract to procure services or any material, supplies or equipment, or to acquire, sell, or lease any land or building from any Business Entity, where the value of the transaction exceeds \$17,500, if that Business Entity has solicited or made any contribution of money, or pledge of contribution, including in-kind contributions, to a candidate committee and/or election fund of any candidate for or holder of the public office of Governor or Lieutenant Governor, to any State, county, municipal political party committee, or to any legislative leadership committee during certain specified time periods. It shall be a breach of the terms of the contract for the business entity to:

- A. Make or solicit a contribution in violation of the statute;
- B. Knowingly conceal or misrepresent a contribution given or received;
- C. Make or solicit contributions through intermediaries for the purpose of concealing or misrepresenting the source of the contribution;
- D. Make or solicit any contribution on the condition or with the agreement that it will be contributed to a campaign committee or any candidate of holder of the public office of Governor or Lieutenant Governor, or to any State or county party committee;
- E. Engage or employ a lobbyist or consultant with the intent or understanding that such lobbyist or consultant would make or solicit any contribution, which if made or solicited by the business entity itself, would subject that entity to the restrictions of the Legislation;
- F. Fund contributions made by third parties, including consultants, attorneys, family members, and employees;
- G. Engage in any exchange of contributions to circumvent the intent of the Legislation; or
- H. Directly or indirectly through or by any other person or means, do any act which would subject that entity to the restrictions of the Legislation.

Prior to awarding any Contract or agreement to any Business Entity, the Business Entity proposed as the intended Contractor of the Contract shall submit the Two-Year Chapter 51/Executive Order 117 Vendor Certification and Disclosure of Political Contributions form, certifying that no contributions prohibited by either Chapter 51 or Executive Order No. 117 have been made by the Business Entity and reporting all qualifying contributions made by the Business Entity or any person or entity whose contributions are attributable to the Business Entity. The required form and instructions, available for review on the Division's website at <http://www.state.nj.us/treasury/purchase/forms/eo134/Chapter51.pdf>, shall be provided to the intended Contractor for completion and submission to the Division with the Notice of Intent to Award. Upon receipt of a Notice of Intent to Award a Contract, the intended Contractor shall submit to the Division, in care of the Division Procurement Specialist, the Certification and Disclosure(s) within five (5) business days of the State's request. The Certification and Disclosure(s) may be executed electronically by typing the name of the authorized signatory in the "Signature" block as an alternative to downloading, physically signing the form, scanning the form, and uploading the form. Failure to submit the required forms will preclude award of a Contract under this Bid Solicitation, as well as future Contract opportunities; and

Further, the Contractor is required, on a continuing basis, to report any contributions it makes during the term of the Contract, and any extension(s) thereof, at the time any such contribution is made. The required form and instructions, available for review on the Division's website at <http://www.state.nj.us/treasury/purchase/forms/eo134/Chapter51.pdf>, shall be provided to the intended Contractor with the Notice of Intent to Award.

## 2.9 POLITICAL CONTRIBUTION DISCLOSURE

The contractor is advised of its responsibility to file an annual disclosure statement on political contributions with the New Jersey Election Law Enforcement Commission (ELEC), pursuant to N.J.S.A. 19:44A-20.27 (P.L. 2005, c. 271, §3 as amended) if in a calendar year the contractor

receives one (1) or more contracts valued at \$50,000.00 or more. It is the contractor's responsibility to determine if filing is necessary. Failure to file can result in the imposition of penalties by ELEC. Additional information about this requirement is available from ELEC by calling 1(888)313-3532 or on the internet at <http://www.elec.state.nj.us/>.

## 2.10 STANDARDS PROHIBITING CONFLICTS OF INTEREST

The following prohibitions on contractor activities shall apply to all contracts or purchase agreements made with the State of New Jersey, pursuant to Executive Order No. 189 (1988).

- A. No vendor shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b. and e., in the Department of the Treasury or any other agency with which such vendor transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i., of any such officer or employee, or partnership, firm or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g;
- B. The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any State vendor shall be reported in writing forthwith by the vendor to the New Jersey Office of the Attorney General and the Executive Commission on Ethical Standards, now known as the State Ethics Commission;
- C. No vendor may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such vendor to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he/she is employed or associated or in which he/she has an interest within the meaning of N.J.S.A. 52:13D-13g. Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, now known as the State Ethics Commission, which may grant a waiver of this restriction upon application of the State officer or employee or special State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest;
- D. No vendor shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his/her official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee;
- E. No vendor shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his/her official position to secure unwarranted privileges or advantages for the vendor or any other person; and
- F. The provisions cited above in paragraphs 2.8A through 2.8E shall not be construed to prohibit a State officer or employee or Special State officer or employee from receiving gifts from or contracting with vendors under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards, now known as the State Ethics Commission may promulgate under paragraph 3c of Executive Order No. 189.

## 2.11 NEW JERSEY BUSINESS ETHICS GUIDE CERTIFICATION

The Treasurer has established a business ethics guide to be followed by a Contractor in dealings with the State. The guide can be found at: <https://www.nj.gov/treasury/purchase/pdf/BusinessEthicsGuide.pdf>.

## 2.12 NOTICE TO ALL CONTRACTORS SET-OFF FOR STATE TAX NOTICE

Pursuant to N.J.S.A. 54:49-19, effective January 1, 1996, and notwithstanding any provision of the law to the contrary, whenever any taxpayer, partnership or S corporation under contract to provide goods or services or construction projects to the State of New Jersey or its agencies or instrumentalities, including the legislative and judicial branches of State government, is entitled to payment for those goods or services at the same time a taxpayer, partner or shareholder of that entity is indebted for any State tax, the Director of the Division of Taxation shall seek to set off that taxpayer's or shareholder's share of the payment due the taxpayer, partnership, or S corporation. The amount set off shall not allow for the deduction of any expenses or other deductions which might be attributable to the taxpayer, partner or shareholder subject to set-off under this act.

The Director of the Division of Taxation shall give notice to the set-off to the taxpayer and provide an opportunity for a hearing within 30 days of such notice under the procedures for protests established under R.S. 54:49-18. No requests for conference, protest, or subsequent appeal to the Tax Court from any protest under this section shall stay the collection of the indebtedness. Interest that may be payable by the State, pursuant to P.L. 1987, c.184 (c.52:32-32 et seq.), to the taxpayer shall be stayed.

## 2.13 COMPLIANCE - LAWS

The contractor must comply with all local, State and Federal laws, rules and regulations applicable to this contract and to the goods delivered and/or services performed hereunder.

## 2.14 COMPLIANCE - STATE LAWS

It is agreed and understood that any contracts and/or orders placed as a result of [this proposal] shall be governed and construed and the rights and obligations of the parties hereto shall be determined in accordance with the laws of the State of New Jersey.

## **2.15 WARRANTY OF NO SOLICITATION ON COMMISSION OR CONTINGENT FEE BASIS**

The contractor warrants that no person or selling agency has been employed or retained to solicit or secure the contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee, except bona fide employees or bona fide established commercial or selling agencies maintained by the contractor for the purpose of securing business. If a breach or violation of this section occurs, the State shall have the right to terminate the contract without liability or in its discretion to deduct from the contract price or consideration the full amount of such commission, percentage, brokerage or contingent fee.

## **2.16 DISCLOSURE OF INVESTIGATIONS AND OTHER ACTIONS**

The Contractor should submit the Disclosure of Investigations and Other Actions Form which provides a detailed description of any investigation, litigation, including administrative complaints or other administrative proceedings, involving any public sector clients during the past five (5) years, including the nature and status of the investigation, and, for any litigation, the caption of the action, a brief description of the action, the date of inception, current status, and, if applicable, disposition. If a Contractor does not submit the form with the Quote, the Contractor must comply within seven (7) business days of the State's request or the State may deem the Quote non-responsive.

## **3.0 STATE LAW REQUIRING MANDATORY COMPLIANCE BY CONTRACTORS UNDER CIRCUMSTANCES SET FORTH IN LAW OR BASED ON THE TYPE OF CONTRACT**

### **3.1 COMPLIANCE - CODES**

The contractor must comply with New Jersey Uniform Construction Code and the latest National Electrical Code 70®, B.O.C.A. Basic Building code, Occupational Safety and Health Administration and all applicable codes for this requirement. The contractor shall be responsible for securing and paying all necessary permits, where applicable.

### **3.2 PREVAILING WAGE ACT**

The New Jersey Prevailing Wage Act, N.J.S.A. 34: 11-56.25 et seq. is hereby made part of every contract entered into on behalf of the State of New Jersey through the Division of Purchase and Property, except those contracts which are not within the contemplation of the Act. The Contractor's signature on [the proposal] is his/her guarantee that neither he/she nor any subcontractors he/she might employ to perform the work covered by [the proposal] has been suspended or debarred by the Commissioner, Department of Labor and Workforce Development for violation of the provisions of the Prevailing Wage Act and/or the Public Works Contractor Registration Acts; the Contractor's signature on the proposal is also his/her guarantee that he/she and any subcontractors he/she might employ to perform the work covered by [the proposal] shall comply with the provisions of the Prevailing Wage and Public Works Contractor Registration Acts, where required.

### **3.3 PUBLIC WORKS CONTRACTOR REGISTRATION ACT**

The New Jersey Public Works Contractor Registration Act requires all contractors, subcontractors and lower tier subcontractor(s) who engage in any contract for public work as defined in N.J.S.A. 34:11-56.26 be first registered with the New Jersey Department of Labor and Workforce Development pursuant to N.J.S.A. 34:11-56.51. Any questions regarding the registration process should be directed to the Division of Wage and Hour Compliance.

### **3.4 PUBLIC WORKS CONTRACT - ADDITIONAL AFFIRMATIVE ACTION REQUIREMENTS**

N.J.S.A. 10:2-1 requires that during the performance of this contract, the contractor must agree as follows:

- A. In the hiring of persons for the performance of work under this contract or any subcontract hereunder, or for the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under this contract, no contractor, nor any person acting on behalf of such contractor or subcontractor, shall, by reason of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex, discriminate against any person who is qualified and available to perform the work to which the employment relates;
- B. No contractor, subcontractor, nor any person on his/her behalf shall, in any manner, discriminate against or intimidate any employee engaged in the performance of work under this contract or any subcontract hereunder, or engaged in the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under such contract, on account of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex;
- C. There may be deducted from the amount payable to the contractor by the contracting public agency, under this contract, a penalty of \$50.00 for each person for each calendar day during which such person is discriminated against or intimidated in violation of the provisions of the contract; and
- D. This contract may be canceled or terminated by the contracting public agency, and all money due or to become due hereunder may be forfeited, for any violation of this section of the contract occurring after notice to the contractor from the contracting public agency of any prior violation of this section of the contract.

N.J.S.A. 10:5-33 and N.J.A.C. 17:27-3.5 require that during the performance of this contract, the contractor must agree as follows:

- A. The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such action shall include, but not be limited to the following: employment, upgrading, demotion,

or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of this nondiscrimination clause;

- B. The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex;
- C. The contractor or subcontractor where applicable, will send to each labor union or representative of workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer, advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment, N.J.A.C. 17:27-3.7 requires all contractors and subcontractors, if any, to further agree as follows:
  - 1. The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2;
  - 2. The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices;
  - 3. The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions; and
  - 4. In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

### **3.5 BUILDING SERVICE**

Pursuant to N.J.S.A. 34:11-56.58 et seq., in any contract for building services, as defined in N.J.S.A. 34:11-56.59, the employees of the contractor or subcontractors shall be paid prevailing wage for building services rates, as defined in N.J.S.A. 34:11-56.59. The prevailing wage shall be adjusted annually during the term of the contract.

### **3.6 THE WORKER AND COMMUNITY RIGHT TO KNOW ACT**

The provisions of N.J.S.A. 34:5A-1 et seq. which require the labeling of all containers of hazardous substances are applicable to this contract. Therefore, all goods offered for purchase to the State must be labeled by the contractor in compliance with the provisions of the statute.

### **3.7 SERVICE PERFORMANCE WITHIN U.S.**

Under N.J.S.A. 52:34-13.2, all contracts primarily for services awarded by the Director shall be performed within the United States, except when the Director certifies in writing a finding that a required service cannot be provided by a contractor or subcontractor within the United States and the certification is approved by the State Treasurer.

A shift to performance of services outside the United States during the term of the contract shall be deemed a breach of contract. If, during the term of the contract, the contractor or subcontractor, proceeds to shift the performance of any of the services outside the United States, the contractor shall be deemed to be in breach of its contract, which contract shall be subject to termination for cause pursuant to Section 5.7(b) (1) of the Standard Terms and Conditions, unless previously approved by the Director and the Treasurer.

### **3.8 BUY AMERICAN**

Pursuant to N.J.S.A. 52:32-1, if manufactured items or farm products will be provided under this contract to be used in a public work, they shall be manufactured or produced in the United States, whenever available, and the contractor shall be required to so certify.

### **3.9 DOMESTIC MATERIALS**

Pursuant to N.J.S.A. 52:33-2 et seq., if the contract is for the construction, alteration or repair of any public work, the contractor and all subcontractors shall use only domestic materials in the performance of the work unless otherwise noted in the specifications.

### **3.10 DIANE B. ALLEN EQUAL PAY ACT**

Pursuant to N.J.S.A. 34:11-56.14 and N.J.A.C. 12:10-1.1 et seq., a contractor performing "qualifying services" or "public work" to the State or any agency or instrumentality of the State shall provide the Commissioner of Labor and Workforce Development a report regarding the compensation and hours worked by employees categorized by gender, race, ethnicity, and job category. For more information and report templates see <https://nj.gov/labor/equalpay/equalpay.html>.

### 3.11 EMPLOYEE MISCLASSIFICATION

In accordance with [Governor Murphy's Executive Order #25](#) and the [Task Force's July 2019 Report](#), employers are required to properly classify their employees. Workers are presumed to be employees and not independent contractors, unless the employer can demonstrate all three factors of the "ABC Test" below:

- A. Such individual has been and will continue to be free from control or direction of the performance of such service, but under his or her contract of service and in fact; and
- B. Such service is either outside the usual course of business for which such service is performed, or that such service is performed outside of all places of business of the enterprise for which such service is performed; and
- C. Such individual is customarily engaged in an independently established trade, occupation, profession or business.

This test has been adopted by New Jersey under its Wage & Hour, Wage Payment and Unemployment Insurance Laws to determine whether a worker is properly classified. Under N.J.S.A. 34:1A-1.17-1.19, the Department of Labor and Workforce Development has the authority to investigate potential violations of these laws and issue penalties and stop work order to employers found to be in violation of the laws.

### 3.12 EXECUTIVE ORDER NO. 271 (MURPHY)

Pursuant to [Governor Murphy's Executive Order No. 271](#) (EO 271) which was signed and went into effect on October 20, 2021, a covered contractor, must certify that it has a policy in place:

- (1) that requires all covered workers to provide adequate proof, in accordance with EO 271, to the covered contractor that the covered worker has been fully vaccinated; or
- (2) that requires that unvaccinated covered workers submit to COVID-19 screening testing at minimum one to two times weekly until such time as the covered worker is fully vaccinated; and
- (3) that the covered contractor has a policy for tracking COVID-19 screening test results as required by EO 271 and must report the results to local public health departments.

The requirements of EO 271 apply to all covered contractors and subcontractors, at any tier, providing services, construction, demolition, remediation, removal of hazardous substances, alteration, custom fabrication, repair work, or maintenance work, or a leasehold interest in real property through which covered workers have access to State property.

These requirements shall automatically expire when EO 271 is rescinded.

## 4.0 INDEMNIFICATION AND INSURANCE

### 4.1 INDEMNIFICATION

The contractor's liability to the State and its employees in third party suits shall be as follows:

- A. Indemnification for Third Party Claims - The contractor shall assume all risk of and responsibility for, and agrees to indemnify, defend, and save harmless the State of New Jersey and its employees from and against any and all claims, demands, suits, actions, recoveries, judgments and costs and expenses in connection therewith which shall arise from or result directly or indirectly from the work and/or materials supplied under this contract, including liability of any nature or kind for or on account of the use of any copyrighted or uncopyrighted composition, secret process, patented or unpatented invention, article or appliance furnished or used in the performance of this contract;
- B. The contractor's indemnification and liability under subsection (A) is not limited by, but is in addition to the insurance obligations contained in Section 4.2 of these Terms and Conditions; and
- C. In the event of a patent and copyright claim or suit, the contractor, at its option, may: (1) procure for the State of New Jersey the legal right to continue the use of the product; (2) replace or modify the product to provide a non-infringing product that is the functional equivalent; or (3) refund the purchase price less a reasonable allowance for use that is agreed to by both parties.

### 4.2 INSURANCE

The contractor shall secure and maintain in force for the term of the contract insurance as provided herein. All required insurance shall be provided by insurance companies with an A-VIII or better rating by A.M. Best & Company. All policies must be endorsed to provide 30 days' written notice of cancellation or material change to the State of New Jersey at the address shown below. If the contractor's insurer cannot provide 30 days written notice, then it will become the obligation of the contractor to provide the same. The contractor shall provide the State with current certificates of insurance for all coverages and renewals thereof. Renewal certificates shall be provided within 30 days of the expiration of the insurance. The contractor shall not begin to provide services or goods to the State until evidence of the required insurance is provided. The certificates of insurance shall indicate the contract number or purchase order number and title of the contract in the Description of Operations box and shall list the State of New Jersey, Department of the Treasury, Division of Purchase & Property, Contract Compliance & Audit Unit, P.O. Box 236, Trenton, New Jersey 08625 in the Certificate Holder box. The certificates and any notice of cancellation shall be emailed to the State at: [ccau.certificate@treas.nj.gov](mailto:ccau.certificate@treas.nj.gov)

The insurance to be provided by the contractor shall be as follows:

- A. Occurrence Form Commercial General Liability Insurance or its equivalent: The minimum limit of liability shall be \$1,000,000 per occurrence as a combined single limit for bodily injury and property damage. The above required Commercial General Liability Insurance policy or its equivalent shall name the State, its officers, and employees as "Additional Insureds" and include the blanket additional insured endorsement or its equivalent. The coverage to be provided under these policies shall be at least as broad as that provided by the standard basic Commercial General Liability Insurance occurrence coverage forms or its equivalent currently in use in the State of New

Jersey, which shall not be circumscribed by any endorsement limiting the breadth of coverage;

- B. Automobile Liability Insurance which shall be written to cover any automobile used by the insured. Limits of liability for bodily injury and property damage shall not be less than \$1,000,000 per occurrence as a combined single limit. The State must be named as an "Additional Insured" and a blanket additional insured endorsement or its equivalent must be provided when the services being procured involve vehicle use on the State's behalf or on State controlled property;
- C. Worker's Compensation Insurance applicable to the laws of the State of New Jersey and Employers Liability Insurance with limits not less than:
  - 1. \$1,000,000 BODILY INJURY, EACH OCCURRENCE;
  - 2. \$1,000,000 DISEASE EACH EMPLOYEE; and
  - 3. \$1,000,000 DISEASE AGGREGATE LIMIT.

This \$1,000,000 amount may be raised when deemed necessary by the Director;

In the case of a contract entered into pursuant to N.J.S.A. 52:32-17 et seq., (small business set asides) the minimum amount of insurance coverage in subsections A, B, and C. above may be amended for certain commodities when deemed in the best interests of the State by the Director.

## **5.0 TERMS GOVERNING ALL CONTRACTS**

### **5.1 CONTRACTOR IS INDEPENDENT CONTRACTOR**

The contractor's status shall be that of any independent contractor and not as an employee of the State.

### **5.2 RESERVED**

### **5.3 CONTRACT TERM AND EXTENSION OPTION**

If, in the opinion of the Director, it is in the best interest of the State to extend a contract, the contractor shall be so notified of the Director's Intent at least 30 days prior to the expiration date of the existing contract. The contractor shall have 15 calendar days to respond to the Director's request to extend the term and period of performance of the contract. If the contractor agrees to the extension, all terms and conditions of the original contract shall apply unless more favorable terms for the State have been negotiated.

### **5.4 STATE'S OPTION TO REDUCE SCOPE OF WORK**

The State has the option, in its sole discretion, to reduce the scope of work for any deliverable, task or subtask called for under this contract. In such an event, the Director shall provide to the contractor advance written notice of the change in scope of work and what the Director believes should be the corresponding adjusted contract price. Within five (5) business days of receipt of such written notice, if either is applicable:

- A. If the contractor does not agree with the Director's proposed adjusted contract price, the contractor shall submit to the Director any additional information that the contractor believes impacts the adjusted contract price with a request that the Director reconsider the proposed adjusted contract price. The parties shall negotiate the adjusted contract price. If the parties are unable to agree on an adjusted contract price, the Director shall make a prompt decision taking all such information into account, and shall notify the contractor of the final adjusted contract price; and
- B. If the contractor has undertaken any work effort toward a deliverable, task or subtask that is being changed or eliminated such that it would not be compensated under the adjusted contract, the contractor shall be compensated for such work effort according to the applicable portions of its price schedule and the contractor shall submit to the Director an itemization of the work effort already completed by deliverable, task or subtask within the scope of work, and any additional information the Director may request. The Director shall make a prompt decision taking all such information into account, and shall notify the contractor of the compensation to be paid for such work effort.

Any changes or modifications to the terms of this Contract shall be valid only when they have been reduced to writing and signed by the Contractor and the Director.

### **5.5 CHANGE IN LAW**

If, after award, a change in applicable law or regulation occurs which affects the Contract, the parties may amend the Contract, including pricing, in order to provide equitable relief for the party disadvantaged by the change in law. The parties shall negotiate in good faith, however if agreement is not possible after reasonable efforts, the Director shall make a prompt decision as to an equitable adjustment, taking all relevant information into account, and shall notify the Contractor of the final adjusted contract price.

### **5.6 SUSPENSION OF WORK**

The State may, for valid reason, issue a stop order directing the contractor to suspend work under the contract for a specific time. The contractor shall be paid for goods ordered, goods delivered, or services requested and performed until the effective date of the stop order. The contractor shall resume work upon the date specified in the stop order, or upon such other date as the State Contract Manager may thereafter direct in writing. The period of suspension shall be deemed added to the contractor's approved schedule of performance. The Director shall make an equitable adjustment, if any is

required, to the contract price. The contractor shall provide whatever information that Director may require related to the equitable adjustment.

## 5.7 TERMINATION OF CONTRACT

- A. For Convenience:  
Notwithstanding any provision or language in this contract to the contrary, the Director may terminate this contract at any time, in whole or in part, for the convenience of the State, upon no less than 30 days written notice to the contractor;
- B. For Cause:
  - 1. Where a contractor fails to perform or comply with a contract or a portion thereof, and/or fails to comply with the complaints procedure in N.J.A.C. 17:12-4.2 et seq., the Director may terminate the contract, in whole or in part, upon ten (10) days' notice to the contractor with an opportunity to respond; and
  - 2. Where in the reasonable opinion of the Director, a contractor continues to perform a contract poorly as demonstrated by e.g., formal complaints, late delivery, poor performance of service, short-shipping, so that the Director is required to use the complaints procedure in N.J.A.C. 17:12-4.2 et seq., and there has been a failure on the part of the contractor to make progress towards ameliorating the issue(s) or problem(s) set forth in the complaint, the Director may terminate the contract, in whole or in part, upon ten (10) days' notice to the contractor with an opportunity to respond.
- C. In cases of emergency the Director may shorten the time periods of notification and may dispense with an opportunity to respond; and
- D. In the event of termination under this section, the contractor shall be compensated for work performed in accordance with the contract, up to the date of termination. Such compensation may be subject to adjustments.

## 5.8 SUBCONTRACTING

The Contractor may not subcontract other than as identified in the contractor's proposal without the prior written consent of the Director. Such consent, if granted in part, shall not relieve the contractor of any of his/her responsibilities under the contract, nor shall it create privity of contract between the State and any subcontractor. If the contractor uses a subcontractor to fulfill any of its obligations, the contractor shall be responsible for the subcontractor's: (a) performance; (b) compliance with all of the terms and conditions of the contract; and (c) compliance with the requirements of all applicable laws. Nothing contained in any of the contract documents, shall be construed as creating any contractual relationship between any subcontractor and the State.

## 5.9 RESERVED

## 5.10 MERGERS, ACQUISITIONS AND ASSIGNMENTS

If, during the term of this contract, the contractor shall merge with or be acquired by another firm, the contractor shall give notice to the Director as soon as practicable and in no event longer than 30 days after said merger or acquisition. The contractor shall provide such documents as may be requested by the Director, which may include but need not be limited to the following: corporate resolutions prepared by the awarded contractor and new entity ratifying acceptance of the original contract, terms, conditions and prices; updated information including ownership disclosure and Federal Employer Identification Number. The documents must be submitted within 30 days of the request. Failure to do so may result in termination of the contract for cause.

If, at any time during the term of the contract, the contractor's partnership, limited liability company, limited liability partnership, professional corporation, or corporation shall dissolve, the Director must be so notified. All responsible parties of the dissolved business entity must submit to the Director in writing, the names of the parties proposed to perform the contract, and the names of the parties to whom payment should be made. No payment shall be made until all parties to the dissolved business entity submit the required documents to the Director.

The contractor may not assign its responsibilities under the contract, in whole or in part, without the prior written consent of the Director.

## 5.11 PERFORMANCE GUARANTEE OF CONTRACTOR

The contractor hereby certifies that:

- A. The equipment offered is standard new equipment, and is the manufacturer's latest model in production, with parts regularly used for the type of equipment offered; that such parts are all in production and not likely to be discontinued; and that no attachment or part has been substituted or applied contrary to manufacturer's recommendations and standard practice;
- B. All equipment supplied to the State and operated by electrical current is UL listed where applicable;
- C. All new machines are to be guaranteed as fully operational for the period stated in the contract from time of written acceptance by the State. The contractor shall render prompt service without charge, regardless of geographic location;
- D. Sufficient quantities of parts necessary for proper service to equipment shall be maintained at distribution points and service headquarters;
- E. Trained mechanics are regularly employed to make necessary repairs to equipment in the territory from which the service request might emanate within a 48-hour period or within the time accepted as industry practice;
- F. During the warranty period the contractor shall replace immediately any material which is rejected for failure to meet the requirements of the contract; and
- G. All services rendered to the State shall be performed in strict and full accordance with the specifications stated in the contract. The contract shall not be considered complete until final approval by the State's using agency is rendered.



## 5.12 DELIVERY REQUIREMENTS

- A. Deliveries shall be made at such time and in such quantities as ordered in strict accordance with conditions contained in the contract;
- B. The contractor shall be responsible for the delivery of material in first class condition to the State's using agency or the purchaser under this contract and in accordance with good commercial practice;
- C. Items delivered must be strictly in accordance with the contract; and
- D. In the event delivery of goods or services is not made within the number of days stipulated or under the schedule defined in the contract, the using agency shall be authorized to obtain the material or service from any available source, the difference in price, if any, to be paid by the contractor.

## 5.13 APPLICABLE LAW AND JURISDICTION

This contract and any and all litigation arising therefrom or related thereto shall be governed by the applicable laws, regulations and rules of evidence of the State of New Jersey without reference to conflict of laws principles and shall be filed in the appropriate Division of the New Jersey Superior Court.

## 5.14 CONTRACT AMENDMENT

Except as provided herein, the contract may only be amended by written agreement of the State and the contractor.

## 5.15 MAINTENANCE OF RECORDS

Pursuant to N.J.A.C. 17:44-2.2, the contractor shall maintain all documentation related to products, transactions or services under this contract for a period of five (5) years from the date of final payment. Such records shall be made available to the New Jersey Office of the State Comptroller upon request.

## 5.16 ASSIGNMENT OF ANTITRUST CLAIM(S)

The contractor recognizes that in actual economic practice, overcharges resulting from antitrust violations are in fact usually borne by the ultimate purchaser. Therefore, and as consideration for executing this contract, the contractor, acting herein by and through its duly authorized agent, hereby conveys, sells, assigns, and transfers to the State of New Jersey, for itself and on behalf of its political subdivisions and public agencies, all right, title and interest to all claims and causes of action it may now or hereafter acquire under the antitrust laws of the United States or the State of New Jersey, relating to the particular goods and services purchased or acquired by the State of New Jersey or any of its political subdivisions or public agencies pursuant to this contract.

In connection with this assignment, the following are the express obligations of the contractor:

- A. It shall take no action that will in any way diminish the value of the rights conveyed or assigned hereunder;
- B. It shall advise the Attorney General of New Jersey:
  1. In advance of its intention to commence any action on its own behalf regarding any such claim or cause(s) of action; and
  2. Immediately upon becoming aware of the fact that an action has been commenced on its behalf by some other person(s) of the pendency of such action.
- C. It shall notify the defendants in any antitrust suit of the within assignment at the earliest practicable opportunity after the contractor has initiated an action on its own behalf or becomes aware that such an action has been filed on its behalf by another person. A copy of such notice shall be sent to the Attorney General of New Jersey; and
- D. It is understood and agreed that in the event any payment under any such claim or cause of action is made to the contractor, it shall promptly pay over to the State of New Jersey the allotted share thereof, if any, assigned to the State hereunder.

## 5.17 NEWS RELEASES

The Contractor is not permitted to issue news releases pertaining to any aspect of the services being provided under this Contract without the prior written consent of the Director.

## 5.18 ADVERTISING

The Contractor shall not use the State's name, logos, images, or any data or results arising from this Contract as a part of any commercial advertising without first obtaining the prior written consent of the Director.

## 5.19 ORGAN DONATION

As required by N.J.S.A. 52:32-33.1, the State encourages the contractor to disseminate information relative to organ donation and to notify its employees, through information and materials or through an organ and tissue awareness program, of organ donation options. The information provided to employees should be prepared in collaboration with the organ procurement organizations designated pursuant to 42 U.S.C. 1320b-8 to serve in this State.

## 5.20 LICENSES AND PERMITS

The Contractor shall obtain and maintain in full force and effect all required licenses, permits, and authorizations necessary to perform this Contract. Notwithstanding the requirements of the Bid Solicitation, the Contractor shall supply the State Contract Manager with evidence of all such licenses, permits and authorizations. This evidence shall be submitted subsequent to this Contract award. All costs associated with any such licenses, permits, and authorizations must be considered by the Contractor in its Quote.

## 5.21 CLAIMS AND REMEDIES

- A. All claims asserted against the State by the Contractor shall be subject to the New Jersey Tort Claims Act, N.J.S.A. 59:1-1, et seq., and/or the New Jersey Contractual Liability Act, N.J.S.A. 59:13-1, et seq.
- B. Nothing in this Contract shall be construed to be a waiver by the State of any warranty, expressed or implied, of any remedy at law or equity, except as specifically and expressly stated in a writing executed by the Director.
- C. In the event that the Contractor fails to comply with any material Contract requirements, the Director may take steps to terminate this Contract in accordance with the SSTC, authorize the delivery of Contract items by any available means, with the difference between the price paid and the defaulting Contractor's price either being deducted from any monies due the defaulting Contractor or being an obligation owed the State by the defaulting Contractor, as provided for in the State administrative code, or take any other action or seek any other remedies available at law or in equity.

## 5.22 ACCESSIBILITY COMPLIANCE

The Contractor acknowledges that the State may be required to comply with the accessibility standards of Section 508 of the Rehabilitation Act, 29 U.S.C. §794. The Contractor agrees that any information that it provides to the State in the form of a Voluntary Product Accessibility Template (VPAT) about the accessibility of the Software is accurate to a commercially reasonable standard and the Contractor agrees to provide the State with technical information available to support such VPAT documentation in the event that the State relied on any of Contractor's VPAT information to comply with the accessibility standards of Section 508 of the Rehabilitation Act, 29 U.S.C. §794. In addition, Contractor shall defend any claims against the State that the Software does not meet the accessibility standards set forth in the VPAT provided by Provider in order to comply with the accessibility standards of Section 508 of the Rehabilitation Act, 29 U.S.C. §794 and will indemnify the State with regard to any claim made against the State with regard to any judgment or settlement resulting from those claims to the extent the Provider's Software provided under this Contract was not accessible in the same manner as or to the degree set forth in the Contractor's statements or information about accessibility as set forth in the then-current version of an applicable VPAT.

## 5.23 CONFIDENTIALITY

- A. The obligations of the State under this provision are subject to the New Jersey Open Public Records Act ("OPRA"), N.J.S.A. 47:1A-1 et seq., the New Jersey common law right to know, and any other lawful document request or subpoena;
- B. By virtue of this Contract, the parties may have access to information that is confidential to one another. The parties agree to disclose to each other only information that is required for the performance of their obligations under this Contract. Contractor's Confidential Information, to the extent not expressly prohibited by law, shall consist of all information clearly identified as confidential at the time of disclosure Vendor Intellectual Property ("Contractor Confidential Information"). Notwithstanding the previous sentence, the terms and pricing of this Contract are subject to disclosure under OPRA, the common law right to know, and any other lawful document request or subpoena;
- C. The State's Confidential Information shall consist of all information or data contained in documents supplied by the State, any information or data gathered by the Contractor in fulfillment of the Contract and any analysis thereof (whether in fulfillment of the Contract or not);
- D. A party's Confidential Information shall not include information that: (a) is or becomes a part of the public domain through no act or omission of the other party, except that if the information is personally identifying to a person or entity regardless of whether it has become part of the public domain through other means, the other party must maintain full efforts under the Contract to keep it confidential; (b) was in the other party's lawful possession prior to the disclosure and had not been obtained by the other party either directly or indirectly from the disclosing party; (c) is lawfully disclosed to the other party by a third party without restriction on the disclosure; or (d) is independently developed by the other party;
- E. The State agrees to hold Contractor's Confidential Information in confidence, using at least the same degree of care used to protect its own Confidential Information;
- F. In the event that the State receives a request for Contractor Confidential Information related to this Contract pursuant to a court order, subpoena, or other operation of law, the State agrees, if permitted by law, to provide Contractor with as much notice, in writing, as is reasonably practicable and the State's intended response to such order of law. Contractor shall take any action it deems appropriate to protect its documents and/or information;
- G. In addition, in the event Contractor receives a request for State Confidential Information pursuant to a court order, subpoena, or other operation of law, Contractor shall, if permitted by law, provide the State with as much notice, in writing, as is reasonably practicable and Contractor's intended response to such order of law. The State shall take any action it deems appropriate to protect its documents and/or information; and
- H. Notwithstanding the requirements of nondisclosure described in this Section, either party may release the other party's Confidential Information:
  - (i) if directed to do so by a court or arbitrator of competent jurisdiction; or
  - (ii) pursuant to a lawfully issued subpoena or other lawful document request:
    - (a) in the case of the State, if the State determines the documents or information are subject to disclosure and Contractor does not exercise its rights as described in Section 5.23(F), or if Contractor is unsuccessful in defending its rights as described in Section 5.23(F); or
    - (b) in the case of Contractor, if Contractor determines the documents or information are subject to disclosure and the State does not exercise its rights described in Section 5.23(G), or if the State is unsuccessful in defending its rights as described in Section 5.23(G).

## **6.0 TERMS RELATING TO PRICE AND PAYMENT**

### **6.1 PRICE FLUCTUATION DURING CONTRACT**

Unless otherwise agreed to in writing by the State, all prices quoted shall be firm through issuance of contract or purchase order and shall not be subject to increase during the period of the contract. In the event of a manufacturer's or contractor's price decrease during the contract period, the State shall receive the full benefit of such price reduction on any undelivered purchase order and on any subsequent order placed during the contract period. The Director must be notified, in writing, of any price reduction within five (5) days of the effective date. Failure to report price reductions may result in cancellation of contract for cause, pursuant to provision 5.7(b)1.

In an exceptional situation the State may consider a price adjustment. Requests for price adjustments must include justification and documentation.

### **6.2 TAX CHARGES**

The State of New Jersey is exempt from State sales or use taxes and Federal excise taxes. Therefore, price quotations must not include such taxes. The State's Federal Excise Tax Exemption number is 22-75-0050K.

### **6.3 PAYMENT TO VENDORS**

- A. The using agency(ies) is (are) authorized to order and the contractor is authorized to ship only those items covered by the contract resulting from the RFP. If a review of orders placed by the using agency(ies) reveals that goods and/or services other than that covered by the contract have been ordered and delivered, such delivery shall be a violation of the terms of the contract and may be considered by the Director as a basis to terminate the contract and/or not award the contractor a subsequent contract. The Director may take such steps as are necessary to have the items returned by the agency, regardless of the time between the date of delivery and discovery of the violation. In such event, the contractor shall reimburse the State the full purchase price;
- B. The contractor must submit invoices to the using agency with supporting documentation evidencing that work or goods for which payment is sought has been satisfactorily completed or delivered. For commodity contracts, the invoice, together with the Bill of Lading, and/or other documentation to confirm shipment and receipt of contracted goods must be received by the using agency prior to payment. For contracts featuring services, invoices must reference the tasks or subtasks detailed in the Scope of Work and must be in strict accordance with the firm, fixed prices submitted for each task or subtask. When applicable, invoices should reference the appropriate task or subtask or price line number from the contractor's proposal. All invoices must be approved by the State Contract Manager or using agency before payment will be authorized;
- C. In all time and materials contracts, the State Contract Manager or designee shall monitor and approve the hours of work and the work accomplished by contractor and shall document both the work and the approval. Payment shall not be made without such documentation. A form of timekeeping record that should be adapted as appropriate for the Scope of Work being performed can be found at [www.nj.gov/treasury/purchase/forms/Vendor\\_Timesheet.xls](http://www.nj.gov/treasury/purchase/forms/Vendor_Timesheet.xls); and
- D. The contractor shall provide, on a monthly and cumulative basis, a breakdown in accordance with the budget submitted, of all monies paid to any small business, minority or woman-owned subcontractor(s). This breakdown shall be sent to the Office of Diversity and Inclusion.
- E. The Contractor shall have sole responsibility for all payments due any Subcontractor

### **6.4 OPTIONAL PAYMENT METHOD: P-CARD**

The State offers contractors the opportunity to be paid through the MasterCard procurement card (p-card). A contractor's acceptance and a State agency's use of the p-card are optional. P-card transactions do not require the submission of a contractor invoice; purchasing transactions using the p-card will usually result in payment to a contractor in three (3) days. A contractor should take note that there will be a transaction-processing fee for each p-card transaction. To participate, a contractor must be capable of accepting the MasterCard. Additional information can be obtained from banks or merchant service companies.

### **6.5 NEW JERSEY PROMPT PAYMENT ACT**

The New Jersey Prompt Payment Act, N.J.S.A. 52:32-32 et seq., requires state agencies to pay for goods and services within 60 days of the agency's receipt of a properly executed State Payment Voucher or within 60 days of receipt and acceptance of goods and services, whichever is later. Properly executed performance security, when required, must be received by the State prior to processing any payments for goods and services accepted by state agencies. Interest will be paid on delinquent accounts at a rate established by the State Treasurer. Interest shall not be paid until it exceeds \$5.00 per properly executed invoice. Cash discounts and other payment terms included as part of the original agreement are not affected by the Prompt Payment Act.

### **6.6 AVAILABILITY OF FUNDS**

The State's obligation to make payment under this contract is contingent upon the availability of appropriated funds and receipt of revenues from which payment for contract purposes can be made. No legal liability on the part of the State for payment of any money shall arise unless and until funds are appropriated each fiscal year to the using agency by the State Legislature and made available through receipt of revenue.

## **7.0 TERMS RELATING TO ALL CONTRACTS FUNDED, IN WHOLE OR IN PART, BY FEDERAL FUNDS**

The provisions set forth in this Section of the Standard Terms and Conditions apply to all contracts funded, in whole or in part, by Federal funds as required by 2 CFR 200.317.

## **7.1 CONTRACTING WITH SMALL AND MINORITY BUSINESSES, WOMEN'S BUSINESS ENTERPRISES, AND LABOR SURPLUS AREA FIRMS.**

Pursuant to 2 CFR 200.321, the State must take all necessary affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used when possible. Accordingly, if subawards are to be made the Contractor shall:

- (1) Include qualified small and minority businesses and women's business enterprises on solicitation lists;
- (2) Assure that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
- (3) Divide total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
- (4) Establish delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises; and,
- (5) Use the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.

## **7.2 DOMESTIC PREFERENCE FOR PROCUREMENTS**

Pursuant to 2 CFR 200.322, where appropriate, the State has a preference for the purchase, acquisition, or use of goods, products, or materials produced in the United States (including but not limited to iron, aluminum, steel, cement, and other manufactured products). If subawards are to be made the Contractor shall include a preference for the purchase, acquisition, or use of goods, products, or materials produced in the United States (including but not limited to iron, aluminum, steel, cement, and other manufactured products). For purposes of this section:

- (1) "Produced in the United States" means, for iron and steel products, that all manufacturing processes, from the initial melting stage through the application of coatings, occurred in the United States.
- (2) "Manufactured products" means items and construction materials composed in whole or in part of nonferrous metals such as aluminum; plastics and polymer-based products such as polyvinyl chloride pipe; aggregates such as concrete; glass, including optical fiber; and lumber.

## **7.3 PROCUREMENT OF RECOVERED MATERIALS**

Where applicable, in the performance of contract, pursuant to 2 CFR 200.323, the contractor must comply with section 6002 of the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act. The requirements of Section 6002 include procuring only items designated in guidelines of the Environmental Protection Agency (EPA) at 40 CFR Part 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$ 10,000 or the value of the quantity acquired during the preceding fiscal year exceeded \$10,000; procuring solid waste management services in a manner that maximizes energy and resource recovery; and establishing an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

To the extent that the scope of work or specifications in the contract requires the contractor to provide recovered materials the scope of work or specifications are modified to require that as follows.

- i. In the performance of this contract, the Contractor shall make maximum use of products containing recovered materials that are EPA-designated items unless the product cannot be acquired—
  1. Competitively within a timeframe providing for compliance with the contract performance schedule;
  2. Meeting contract performance requirements; or
  3. At a reasonable price.
- ii. Information about this requirement, along with the list of EPA- designated items, is available at EPA's Comprehensive Procurement Guidelines web site, <https://www.epa.gov/smm/comprehensive-procurement-guideline-cpg-program>.
- iii. The Contractor also agrees to comply with all other applicable requirements of Section 6002 of the Solid Waste Disposal Act."

## **7.4 EQUAL EMPLOYMENT OPPORTUNITY**

Except as otherwise provided under 41 CFR Part 60, all contracts that meet the definition of "federally assisted construction contract" in 41 CFR Part 60-1.3 must include the equal opportunity clause provided under 41 CFR 60-1.4(b), in accordance with Executive Order 11246, "Equal Employment Opportunity" (30 FR 12319, 12935, 3 CFR Part, 1964-1965 Comp., p. 339), as amended by Executive Order 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and implementing regulations at 41 CFR part 60, "Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor." See, 2 CFR Part 200, Appendix II, para. C.

During the performance of this contract, the contractor agrees as follows:

- (1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, or national origin. The contractor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment without regard to their race, color, religion, sex, sexual orientation, gender identity, or national origin. Such action shall include, but not be limited to the following:  
Employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous

- places, available to employees and applicants for employment, notices to be provided setting forth the provisions of this nondiscrimination clause.
- (2) The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, or national origin.
  - (3) The contractor will not discharge or in any other manner discriminate against any employee or applicant for employment because such employee or applicant has inquired about, discussed, or disclosed the compensation of the employee or applicant or another employee or applicant. This provision shall not apply to instances in which an employee who has access to the compensation information of other employees or applicants as a part of such employee's essential job functions discloses the compensation of such other employees or applicants to individuals who do not otherwise have access to such information, unless such disclosure is in response to a formal complaint or charge, in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or is consistent with the contractor's legal duty to furnish information.
  - (4) The contractor will send to each labor union or representative of workers with which he/she has a collective bargaining agreement or other contract or understanding, a notice to be provided advising the said labor union or workers' representatives of the contractor's commitments under this section, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
  - (5) The contractor will comply with all provisions of Executive Order 11246 of September 24, 1965, and of the rules, regulations, and relevant orders of the Secretary of Labor.
  - (6) The contractor will furnish all information and reports required by Executive Order 11246 of September 24, 1965, and by rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his/her books, records, and accounts by the administering agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations, and orders.
  - (7) In the event of the contractor's noncompliance with the nondiscrimination clauses of this contract or with any of the said rules, regulations, or orders, this contract may be canceled, terminated, or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts or federally assisted construction contracts in accordance with procedures authorized in Executive Order 11246 of September 24, 1965, and such other sanctions may be imposed and remedies invoked as provided in Executive Order 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided by law.
  - (8) The contractor will include the portion of the sentence immediately preceding paragraph (1) and the provisions of paragraphs (1) through (8) in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to section 204 of Executive Order 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The contractor will take such action with respect to any subcontract or purchase order as the administering agency may direct as a means of enforcing such provisions, including sanctions for noncompliance:

Provided, however, that in the event a contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the administering agency, the contractor may request the United States to enter into such litigation to protect the interests of the United States.

The applicant further agrees that it will be bound by the above equal opportunity clause with respect to its own employment practices when it participates in federally assisted construction work: Provided, That if the applicant so participating is a State or local government, the above equal opportunity clause is not applicable to any agency, instrumentality or subdivision of such government which does not participate in work on or under the contract.

The applicant agrees that it will assist and cooperate actively with the administering agency and the Secretary of Labor in obtaining the compliance of contractors and subcontractors with the equal opportunity clause and the rules, regulations, and relevant orders of the Secretary of Labor, that it will furnish the administering agency and the Secretary of Labor such information as they may require for the supervision of such compliance, and that it will otherwise assist the administering agency in the discharge of the agency's primary responsibility for securing compliance.

The applicant further agrees that it will refrain from entering into any contract or contract modification subject to Executive Order 11246 of September 24, 1965, with a contractor debarred from, or who has not demonstrated eligibility for, Government contracts and federally assisted construction contracts pursuant to the Executive Order and will carry out such sanctions and penalties for violation of the equal opportunity clause as may be imposed upon contractors and subcontractors by the administering agency or the Secretary of Labor pursuant to Part II, Subpart D of the Executive Order. In addition, the applicant agrees that if it fails or refuses to comply with these undertakings, the administering agency may take any or all of the following actions: Cancel, terminate, or suspend in whole or in part this grant (contract, loan, insurance, guarantee); refrain from extending any further assistance to the applicant under the program with respect to which the failure or refund occurred until satisfactory assurance of future compliance has been received from such applicant; and refer the case to the Department of Justice for appropriate legal proceedings.

## **7.5 DAVIS-BACON ACT, 40 U.S.C. 3141-3148, AS AMENDED**

When required by Federal program legislation, all prime construction contracts in excess of \$ 2,000 shall be done in compliance with the Davis-Bacon Act (40 U.S.C. 3141- 3144, and 3146-3148) and the requirements of 29 C.F.R. pt. 5 as may be applicable. The contractor shall comply with 40 U.S.C. 3141-3144, and 3146-3148 and the requirements of 29 C.F.R. pt. 5 as applicable. Contractors are required to pay wages to laborers and mechanics at a rate not less than the prevailing wages specified in a wage determination made by the Secretary of Labor.

Additionally, contractors are required to pay wages not less than once a week.

#### **7.6 COPELAND ANTI-KICK-BACK ACT**

Where applicable, the Contractor must comply with Copeland "Anti-Kickback" Act (40 U.S.C. 3145), as supplemented by Department of Labor regulations (29 CFR Part 3, "Contractors and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States").

- a. Contractor. The Contractor shall comply with 18 U.S.C. § 874, 40 U.S.C. § 3145, and the requirements of 29 C.F.R. pt. 3 as may be applicable, which are incorporated by reference into the OGS centralized contract.
- b. Subcontracts. The Contractor or subcontractor shall insert in any subcontracts the clause above and such other clauses as FEMA may by appropriate instructions require, and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for the compliance by any subcontractor or lower tier subcontractor with all of these contract clauses.
- c. Breach. A breach of the clauses above may be grounds for termination of the OGS centralized contract, and for debarment as a Contractor and subcontractor as provided in 29 C.F.R. § 5.12.

#### **7.7 CONTRACT WORK HOURS AND SAFETY STANDARDS ACT, 40 U.S.C. 3701-3708**

Where applicable, all contracts awarded by the non-Federal entity in excess of \$ 100,000 that involve the employment of mechanics or laborers must comply with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5).

- (1) Overtime requirements. No contractor or subcontractor contracting for any part of the contract work which may require or involve the employment of laborers or mechanics shall require or permit any such laborer or mechanic in any workweek in which he or she is employed on such work to work in excess of forty hours in such workweek unless such laborer or mechanic receives compensation at a rate not less than one and one-half times the basic rate of pay for all hours worked in excess of forty hours in such workweek.
- (2) Violation; liability for unpaid wages; liquidated damages. In the event of any violation of the clause set forth in paragraph (b)(1) of this section the contractor and any subcontractor responsible therefor shall be liable for the unpaid wages. In addition, such contractor and subcontractor shall be liable to the United States (in the case of work done under contract for the District of Columbia or a territory, to such District or to such territory), for liquidated damages. Such liquidated damages shall be computed with respect to each individual laborer or mechanic, including watchmen and guards, employed in violation of the clause set forth in paragraph (b)(1) of this section, in the sum of \$27 for each calendar day on which such individual was required or permitted to work in excess of the standard workweek of forty hours without payment of the overtime wages required by the clause set forth in paragraph (b)(1) of this section.
- (3) Withholding for unpaid wages and liquidated damages. The unauthorized user shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld, from any moneys payable on account of work performed by the contractor or subcontractor under any such contract or any other Federal contract with the same prime contractor, or any other federally-assisted contract subject to the Contract Work Hours and Safety Standards Act, which is held by the same prime contractor, such sums as may be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for unpaid wages and liquidated damages as provided in the clause set forth in paragraph (b)(2) of this section.
- (4) Subcontracts. The contractor or subcontractor shall insert in any subcontracts the clauses set forth in paragraph (b)(1) through (4) of this section and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for compliance by any subcontractor or lower tier subcontractor with the clauses set forth in paragraphs (b)(1) through (4) of this section.

#### **7.8 RIGHTS TO INVENTIONS MADE UNDER A CONTRACT OR AGREEMENT**

If the Federal award meets the definition of "funding agreement" under 37 CFR § 401.2 (a) and the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that "funding agreement," the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the awarding agency.

#### **7.9 CLEAN AIR ACT, 42 U.S.C. 7401-7671Q, AND THE FEDERAL WATER POLLUTION CONTROL ACT, 33 U.S.C. 1251-1387, AS AMENDED**

Where applicable, Contract and subgrants of amounts in excess of \$150,000, must comply with the following:

##### Clean Air Act

- 7.9.1.1 The contractor agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. § 7401 et seq.
- 7.9.1.2 The contractor agrees to report each violation to the Division of Purchase and Property and understands and agrees that the Division of Purchase and Property will, in turn, report each violation as required to assure notification to the Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- 7.9.1.3 The contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.

##### Federal Water Pollution Control Act

1. The contractor agrees to comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. 1251 et seq.

2. The contractor agrees to report each violation to the Division of Purchase and Property and understands and agrees that the Division of Purchase and Property will, in turn, report each violation as required to assure notification to the Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
3. The contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.

#### **7.10 DEBARMENT AND SUSPENSION (EXECUTIVE ORDERS 12549 AND 12689)**

- (1) This contract is a covered transaction for purposes of 2 C.F.R. pt. 180 and 2 C.F.R. pt. 3000. As such, the contractor is required to verify that none of the contractor's principals (defined at 2 C.F.R. § 180.995) or its affiliates (defined at 2 C.F.R. § 180.905) are excluded (defined at 2 C.F.R. § 180.940) or disqualified (defined at 2 C.F.R. § 180.935).
- (2) The contractor must comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, and must include a requirement to comply with these regulations in any lower tier covered transaction it enters into.
- (3) This certification is a material representation of fact relied upon by the State or authorized user. If it is later determined that the contractor did not comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, in addition to remedies available to the State or authorized user, the Federal Government may pursue available remedies, including but not limited to suspension and/or debarment.
- (4) The bidder or proposer agrees to comply with the requirements of 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C while this offer is valid and throughout the period of any contract that may arise from this offer. The bidder or proposer further agrees to include a provision requiring such compliance in its lower tier covered transactions.

#### **7.11 BYRD ANTI-LOBBYING AMENDMENT, 31 U.S.C. 1352**

Contractors that apply or bid for an award exceeding \$100,000 must file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier must also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the non-Federal award. Such disclosures are forwarded from tier to tier up to the recipient who in turn will forward the certification(s) to the awarding agency.

#### **7.12 PROHIBITION ON CERTAIN TELECOMMUNICATIONS AND VIDEO SURVEILLANCE SERVICES OR EQUIPMENT**

- (a) Recipients and subrecipients are prohibited from obligating or expending loan or grant funds to:
  - (1) Procure or obtain;
  - (2) Extend or renew a contract to procure or obtain; or
  - (3) Enter into a contract (or extend or renew a contract) to procure or obtain equipment, services, or systems that uses covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in *Public Law 115-232*, section 889, covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).
    - (i) For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
    - (ii) Telecommunications or video surveillance services provided by such entities or using such equipment.
    - (iii) Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise connected to, the government of a covered foreign country.

## EXHIBIT A - GOODS, GENERAL SERVICE AND PROFESSIONAL SERVICES CONTRACTS

### MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE

N.J.S.A. 10:5-31 et seq. (P.L. 1975, c. 127)

N.J.A.C. 17:27 et seq.

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval;
- Certificate of Employee Information Report; or
- Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at [http://www.state.nj.us/treasury/contract\\_compliance](http://www.state.nj.us/treasury/contract_compliance)).

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase and Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase and Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1 et seq.



## EXHIBIT B - CONSTRUCTION CONTRACTS

### MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE

N.J.S.A. 10:5-31 et seq. (P.L. 1975, c. 127)

N.J.S.A. 10:5-39 et seq. (P.L. 1983, c. 197)

N.J.A.C. 17:27-1.1 et seq.

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, up grading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

N.J.S.A. 10:5-39 et seq. requires contractors, subcontractors, and permitted assignees performing construction, alteration, or repair of any building or public work in excess of \$250,000 to guarantee equal employment opportunity to veterans.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer, pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

When hiring or scheduling workers in each construction trade, the contractor or subcontractor agrees to make good faith efforts to employ minority and women workers in each construction trade consistent with the targeted employment goal prescribed by N.J.A.C. 17:27-7.2; provided, however, that the Dept. of LWD, Construction EEO Monitoring Program may, in its discretion, exempt a contractor or subcontractor from compliance with the good faith procedures prescribed by the following provisions, A, B and C, as long as the Dept. of LWD, Construction EEO Monitoring Program is satisfied that the contractor or subcontractor is employing workers provided by a union which provides evidence, in accordance with standards prescribed by the Dept. of LWD, Construction EEO Monitoring Program, that its percentage of active "card carrying" members who are minority and women workers is equal to or greater than the targeted employment goal established in accordance with N.J.A.C. 17:27-7.2. The contractor or subcontractor agrees that a good faith effort shall include compliance with the following procedures:

- (A) If the contractor or subcontractor has a referral agreement or arrangement with a union for a construction trade, the contractor or subcontractor shall, within three business days of the contract award, seek assurances from the union that it will cooperate with the contractor or subcontractor as it fulfills its affirmative action obligations under this contract and in accordance with the rules promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as supplemented and amended from time to time and the Americans with Disabilities Act. If the contractor or subcontractor is unable to obtain said assurances from the construction trade union at least five business days prior to the commencement of construction work, the contractor or subcontractor agrees to afford equal employment opportunities minority and women workers directly, consistent with this chapter. If the contractor's or subcontractor's prior experience with a construction trade union, regardless of whether the union has provided said assurances, indicates a significant possibility that the trade union will not refer sufficient minority and women workers consistent with affording equal employment opportunities as specified in this chapter, the contractor or subcontractor agrees to be prepared to provide such opportunities to minority and women workers directly, consistent with this chapter, by complying with the hiring or scheduling procedures prescribed under (B) below; and the contractor or subcontractor further agrees to take said action immediately if it determines that the union is not referring minority and women workers consistent with the equal employment opportunity goals set forth in this chapter.
- (B) If good faith efforts to meet targeted employment goals have not or cannot be met for each construction trade by adhering to the procedures of (A) above, or if the contractor does not have a referral agreement or arrangement with a union for a construction trade, the contractor or subcontractor agrees to take the following actions:
  - (1) To notify the public agency compliance officer, the Dept. of LWD, Construction EEO Monitoring Program, and minority and women referral organizations listed by the Division pursuant to N.J.A.C. 17:27-5.3, of its workforce needs, and request referral of minority and women workers;

- (2) To notify any minority and women workers who have been listed with it as awaiting available vacancies;
  - (3) Prior to commencement of work, to request that the local construction trade union refer minority and women workers to fill job openings, provided the contractor or subcontractor has a referral agreement or arrangement with a union for the construction trade;
  - (4) To leave standing requests for additional referral to minority and women workers with the local construction trade union, provided the contractor or subcontractor has a referral agreement or arrangement with a union for the construction trade, the State Training and Employment Service and other approved referral sources in the area;
  - (5) If it is necessary to lay off some of the workers in a given trade on the construction site, layoffs shall be conducted in compliance with the equal employment opportunity and non-discrimination standards set forth in this regulation, as well as with applicable Federal and State court decisions;
  - (6) To adhere to the following procedure when minority and women workers apply or are referred to the contractor or subcontractor:
    - (i) The contractor or subcontractor shall interview the referred minority or women worker.
    - (ii) If said individuals have never previously received any document or certification signifying a level of qualification lower than that required in order to perform the work of the construction trade, the contractor or subcontractor shall in good faith determine the qualifications of such individuals. The contractor or subcontractor shall hire or schedule those individuals who satisfy appropriate qualification standards in conformity with the equal employment opportunity and non-discrimination principles set forth in this chapter. However, a contractor or subcontractor shall determine that the individual at least possesses the requisite skills, and experience recognized by a union, apprentice program or a referral agency, provided the referral agency is acceptable to the Dept. of LWD, Construction EEO Monitoring Program. If necessary, the contractor or subcontractor shall hire or schedule minority and women workers who qualify as trainees pursuant to these rules. All of the requirements, however, are limited by the provisions of (C) below.
    - (iii) The name of any interested women or minority individual shall be maintained on a waiting list, and shall be considered for employment as described in (i) above, whenever vacancies occur. At the request of the Dept. of LWD, Construction EEO Monitoring Program, the contractor or subcontractor shall provide evidence of its good faith efforts to employ women and minorities from the list to fill vacancies.
    - (iv) If, for any reason, said contractor or subcontractor determines that a minority individual or a woman is not qualified or if the individual qualifies as an advanced trainee or apprentice, the contractor or subcontractor shall inform the individual in writing of the reasons for the determination, maintain a copy of the determination in its files, and send a copy to the public agency compliance officer and to the Dept. of LWD, Construction EEO Monitoring Program.
  - (7) To keep a complete and accurate record of all requests made for the referral of workers in any trade covered by the contract, on forms made available by the Dept. of LWD, Construction EEO Monitoring Program and submitted promptly to the Dept. of LWD, Construction EEO Monitoring Program upon request.
- (C) The contractor or subcontractor agrees that nothing contained in (B) above shall preclude the contractor or subcontractor from complying with the union hiring hall or apprenticeship policies in any applicable collective bargaining agreement or union hiring hall arrangement, and, where required by custom or agreement, it shall send journeymen and trainees to the union for referral, or to the apprenticeship program for admission, pursuant to such agreement or arrangement. However, where the practices of a union or apprenticeship program will result in the exclusion of minorities and women or the failure to refer minorities and women consistent with the targeted county employment goal, the contractor or subcontractor shall consider for employment persons referred pursuant to (B) above without regard to such agreement or arrangement; provided further, however, that the contractor or subcontractor shall not be required to employ women and minority advanced trainees and trainees in numbers which result in the employment of advanced trainees and trainees as a percentage of the total workforce for the construction trade, which percentage significantly exceeds the apprentice to journey worker ratio specified in the applicable collective bargaining agreement, or in the absence of a collective bargaining agreement, exceeds the ratio established by practice in the area for said construction trade. Also, the contractor or subcontractor agrees that, in implementing the procedures of (B) above, it shall, where applicable, employ minority and women workers residing within the geographical jurisdiction of the union.

After notification of award, but prior to signing a construction contract, the contractor shall submit to the public agency compliance officer and the Dept. of LWD, Construction EEO Monitoring Program an initial project workforce report (Form AA-201) electronically provided to the public agency by the Dept. of LWD, Construction EEO Monitoring Program, through its website, for distribution to and completion by the contractor, in accordance with N.J.A.C. 17:27-7.

The contractor also agrees to submit a copy of the Monthly Project Workforce Report once a month thereafter for the duration of this contract to the Dept. of LWD, Construction EEO Monitoring Program and to the public agency compliance officer.

The contractor agrees to cooperate with the public agency in the payment of budgeted funds, as is necessary, for on the job and/or off the job programs for outreach and training of minorities and women.

- (D) The contractor and its subcontractors shall furnish such reports or other documents to the Dept. of LWD, Construction EEO Monitoring Program as may be requested by the Dept. of LWD, Construction EEO Monitoring Program from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Dept. of LWD, Construction EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1.1 et seq.

## EXHIBIT C - EXECUTIVE ORDER NO. 151 REQUIREMENTS

It is the policy of the Division of Purchase and Property that its contracts should create a workforce that reflects the diversity of the State of New Jersey. Therefore, contractors engaged by the Division of Purchase and Property to perform under a construction contract shall put forth a good faith effort to engage in recruitment and employment practices that further the goal of fostering equal opportunities to minorities and women.

The contractor must demonstrate to the Division of Purchase and Property's satisfaction that a good faith effort was made to ensure that minorities and women have been afforded equal opportunity to gain employment under the Division of Purchase and Property's contract with the contractor. Payment may be withheld from a contractor's contract for failure to comply with these provisions.

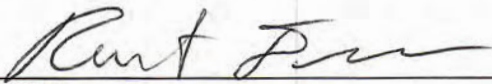
Evidence of a "good faith effort" includes, but is not limited to:

1. The Contractor shall recruit prospective employees through the State Job bank website, managed by the Department of Labor and Workforce Development, available online at <https://newjersey.usnlx.com/>;
2. The Contractor shall keep specific records of its efforts, including records of all individuals interviewed and hired, including the specific numbers of minorities and women;
3. The Contractor shall actively solicit and shall provide the Division of Purchase and Property with proof of solicitations for employment, including but not limited to advertisements in general circulation media, professional service publications and electronic media; and
4. The Contractor shall provide evidence of efforts described at 2 above to the Division of Purchase and Property no less frequently than once every 12 months.
5. The Contractor shall comply with the requirements set forth at N.J.A.C. 17:27.

This language is in addition to and does not replace good faith efforts requirements for construction contracts required by N.J.A.C. 17:27-3.6, 3.7 and 3.8, also known as Exhibit B.

**State of New Jersey Standard Terms and Conditions**  
(Revised December 13, 2021)

I HEREBY ACCEPT THE TERMS AND CONDITIONS OF THIS CONTRACT

  
\_\_\_\_\_  
Signature

05/10/2022

\_\_\_\_\_  
Date

**Robert Feurer, CEO**

\_\_\_\_\_  
Print Name and Title

**CertiSurv, LLC**

\_\_\_\_\_  
Print Name of Contractor

## Attachment 3

# Waivered Contracts Supplement to the State of New Jersey Standard Terms and Conditions

Please see attachment following this page.



**WAIVERED CONTRACTS SUPPLEMENT TO THE  
STATE OF NEW JERSEY STANDARD TERMS AND CONDITIONS**  
(Revised January 11, 2022)

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY  
33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

This Supplement to the State of New Jersey Standard Terms and Conditions ("Supplement") shall apply to all contracts or purchase agreements made with the State of New Jersey ("State") under N.J.S.A. 52:34-9 or -10 ("Waiverred Contracts"). The terms in this Supplement are in addition to, or modify the State of New Jersey Standard Terms and Conditions (SSTCs) as applicable and noted below.

**I. ADDITIONS TO THE STANDARD TERMS AND CONDITIONS FOR ALL WAIVERED CONTRACTS**

**A. ORDER OF PRECEDENCE**

The "Contract" shall consist of the following documents: (1) this Supplement; (2) the State of New Jersey Standard Terms and Conditions; (3) the agency's scope of work; and, (4) the Contractor's proposal including any attachments or documents incorporated by reference. In the event of a conflict in the terms and conditions among the documents comprising this Contract, the order of precedence, for purposes of interpretation thereof, listed from highest ranking to lowest ranking as noted above.

**B. NO ARBITRATION**

Notwithstanding anything to the contrary in Contractor's Standard Form Agreement ("SFA") or Scope of Work ("SOW"), the State does not agree to binding arbitration.

**C. NO AUTO-RENEWAL**

Notwithstanding anything to the contrary in Contractor's SFA or SOW, the State does not agree to auto-renewal of any services, standard software maintenance, technical support or service fees.

**II. ADDITIONS TO THE STANDARD TERMS AND CONDITIONS FOR WAIVERED CONTRACTS, AS APPLICABLE**

**A. STATE'S RIGHT TO INSPECT CONTRACTOR'S FACILITIES**

The State reserves the right to inspect the contractor's establishment before making an award, for the purposes of ascertaining whether the contractor has the necessary facilities for performing the Contract. The State may also consult with clients of the contractor to assist the State in making a contract award that is most advantageous to the State.

**B. STATE'S RIGHT TO REQUEST FURTHER INFORMATION**

The Director reserves the right to request all information which may assist him or her in making a contract award, including factors necessary to evaluate the contractor's financial capabilities to perform the Contract. Further, the Director reserves the right to request a contractor to explain, in detail, how the proposal price was determined.

**C. DELIVERY TIME AND COSTS**

Unless otherwise noted elsewhere in the scope of work, all delivery times are 30 calendar days after receipt of order (ARO) and prices for items in proposals shall be submitted Freight On Board (F.O.B.) Destination (30 calendar days ARO/F.O.B.). The contractor shall assume all costs, liability and responsibility for the delivery of merchandise in good condition to the State's Using Agency or designated purchaser. Thirty calendar days ARO/F.O.B. does not cover "spotting" but does include delivery on the receiving platform of the Using Agency at any destination in the State of New Jersey unless otherwise specified. No additional charges will be allowed for any additional transportation costs resulting from partial shipments made at the contractor's convenience when a single shipment is ordered. The weights and measures of the State's Using Agency receiving the shipment shall govern.

**D. COLLECT ON DELIVERY (C.O.D) TERMS**

C.O.D. terms will not be accepted.

**E. CASH DISCOUNTS**

The contractor is encouraged to offer cash discounts based on expedited payment by the State. The State will make efforts to take advantage of discounts. Should the contractor choose to offer cash discounts the following shall apply:

1. Discount periods shall be calculated starting from the next business day after the Using Agency has accepted the goods or services, received a properly signed and executed invoice and, when required, a properly executed performance security, whichever is latest; and
2. The date on the check issued by the State in payment of that invoice shall be deemed the date of the State's response to that invoice.

**F. PERFORMANCE SECURITY**

If performance security is required, such security must be submitted with the bid in the amount listed in the scope of work. N.J.A.C. 17:12-2.5. Acceptable forms of performance security are as follows:

1. A properly executed individual or annual performance bond issued by an insurance or security company authorized to do business in the State of New Jersey,

2. A certified or cashier's check drawn to the order of "Treasurer, State of New Jersey," or
3. An irrevocable letter of credit issued by a federally insured financial institution and naming "Treasurer, State of New Jersey," as beneficiary.

The Performance Security must be submitted to the State within 30 days of the effective date of the Contract award and cover the period of the Contract and any extensions thereof. Failure to submit performance security may result in cancellation of the Contract for cause and nonpayment for work performed.

Although the performance bond is required for the full term of the Contract, the Director recognizes that the industry practice of sureties is to issue a one (1) year performance bond for goods and services contracts. Thus, the contractor is permitted to submit a one (1) year performance bond for the amount required under the Contract and, on each succeeding anniversary date of the Contract, provide a continuation or renewal certificate to evidence that the bond is in effect for the next year of the Contract. This procedure will remain in place for each year of the Contract thereafter until the termination of the Contract. Failure to provide such proof on the anniversary date of the Contract shall result in suspension of the Contract, and possibly, termination of the Contract.

For performance bonds based on a percentage of the total estimated Contract price. On each anniversary of the effective date of the Contract, the amount of the required performance bond, unless otherwise noted, is calculated by applying the established RFQ performance bond percentage to the outstanding balance of the estimated amount of the Contract price to be paid to the contractor.

In the event that the Contract price is increased by a Contract Amendment, the contractor may be required to provide, within 30 calendar days of the effective date of the Contract Amendment, performance bond coverage for the increase in Contract price. The required increase in the performance bond amount is calculated by applying the established bond percentage set forth above to the increase in Contract price. Failure to provide such proof to the Director of this required coverage may result in the suspension of payment to the contractor until such time the contractor complies with this requirement.

#### **G. RETAINAGE**

If retainage is required on the Contract as stated in the scope of work, the state and/or agency will retain the stated percentage or retainage from each invoice. Payment of retainage will be authorized after satisfactory completion and submission of all services, deliverables or work products by the contractor and acceptance by the agency of all services, deliverables or work products required by the Contract.

For ongoing contracts, the agency will retain the stated percentage of each invoice submitted. At the end of the three (3) month period after payment of each invoice, the agency will review the contractor's performance and if performance has been satisfactory, the agency will release the retainage for the preceding three (3) month period. Following the expiration of the Contract, retained fees will be released to the contractor after certification by the agency's project manager, if any, that all services have been satisfactorily performed.

#### **H. AUDIT NOTICE AND DISPUTE RESOLUTION**

To the extent the contractor's proposal or Standard Form Agreement permits the contractor to conduct periodic audits of the State's usage of the Contractor Intellectual Property provided thereunder, such provision is amended to include the following audit notice and dispute resolution process:

1. **AUDIT NOTICE** – Notwithstanding anything to the contrary in the contractor's proposal or Standard Form Agreement, in the event that the contractor seeks to exercise a right in its proposal or Standard Form Agreement to audit the State's use of Contractor Intellectual Property, the contractor shall deliver simultaneous written notice, no less than thirty days in advance of the audit start date (unless the contractor's notice provides a longer notice period), to the: Agency requesting the waiver contract.
2. The notice shall reference the specific audit provision(s) in the contractor's proposal or Standard Form Agreement being exercised and include copies of same, specify the means by which the contractor will conduct the audit, and shall require the audit to be conducted in accordance with generally accepted standards in the field of such audits.
3. **AUDIT DISPUTE RESOLUTION** -- If the State, in good faith, provides the contractor with written notice of an alleged error in the amount of underpaid fees due the contractor as a result of an audit (the "dispute"), then the parties will endeavor to resolve the dispute in accordance with this paragraph. Each party will appoint a Vice President, Assistant Director, or the equivalent (hereinafter referred to as "Representative") to discuss the dispute and no formal proceedings for the judicial resolution of such dispute, except for the seeking of equitable relief or those required to avoid non-compliance with the New Jersey Contractual Liability Act, N.J.S.A. 59:13-1 et seq., may begin until either such Representative concludes, after a good faith effort to resolve the dispute, that resolution through continued discussion is unlikely. In addition, the parties shall refrain from exercising any termination right related to the dispute being considered under this paragraph and shall continue to perform their respective obligations under the Contract while they endeavor to resolve the dispute under this paragraph.
4. **STATE NOT LIABLE FOR AUDIT COSTS** -- Notwithstanding anything to the contrary in the contractor's proposal or Standard Form Agreement, the State will not reimburse the contractor for any costs related to an audit.
5. **NO AUDIT RIGHT CREATED** -- In the event that the contractor's proposal or Standard Form Agreement does not permit audits of the State's usage of Contractor Intellectual Property, Section 5.19 of this Supplement shall not be interpreted to provide such an audit right.

### **III. ADDITIONS TO THE STANDARD TERMS AND CONDITIONS FOR PROFESSIONAL SERVICES CONTRACTS**

#### **A. INSURANCE FOR PROFESSIONAL SERVICES CONTRACTS**

Section 4.2 Insurance of the SSTC is supplemented with the following:

##### Professional Liability Insurance

The Contractor shall carry Errors and Omissions, Professional Liability Insurance, and/or Professional Liability Malpractice Insurance sufficient to protect the Contractor from any liability arising out the professional obligations performed pursuant to the requirements of this Contract. The insurance shall be in the amount of not less than \$1,000,000 and in such policy forms as shall be approved by the State. If the Contractor has claims-made coverage and subsequently changes carriers during the term of this Contract, it shall obtain from its new Errors and Omissions, Professional Liability Insurance, and/or Professional Malpractice Insurance carrier an endorsement for retroactive coverage.

#### **B. LIMITATION OF LIABILITY FOR PROFESSIONAL SERVICES CONTRACTS**

Section 4.0 Indemnification and Insurance of the SSTC is supplemented with the following:

##### 4.3 LIMITATION OF LIABILITY

The Contractor's liability to the State for actual, direct damages resulting from the Contractor's performance or non-performance of, or in any manner related to this Contract, for any and all claims, shall be limited in the aggregate to 200% of the total value of this Contract. This limitation of liability shall not apply to the following:

- A. The Contractor's obligation to indemnify the State of New Jersey and its employees from and against any claim, demand, loss, damage, or expense relating to bodily injury or the death of any person or damage to real property or tangible personal property, incurred from the work or materials supplied by the Contractor under this Contract caused by negligence or willful misconduct of the Contractor;
- B. The Contractor's breach of its obligations of confidentiality; and
- C. The Contractor's liability with respect to copyright indemnification.

The Contractor's indemnification obligation is not limited by but is in addition to the insurance obligations.

The Contractor shall not be liable for special, consequential, or incidental damages.

### **IV. ADDITIONS TO THE STANDARD TERMS AND CONDITIONS FOR ALL INFORMATION TECHNOLOGY CONTRACTS**

#### **A. DEFINITIONS**

The following definitions shall apply to information technology contracts:

1. The term "Acceptance" means the written confirmation by an Agency that the contractor has completed a Deliverable according to the specified requirements.
2. As defined by N.J.S.A. 56:8-161, the term "Breach of Security" means unauthorized access to electronic files, media, or data containing Personal Data that compromises the security, confidentiality, or integrity of Personal Data when access to the Personal Data has not been secured by encryption or by any other method or technology that renders the Personal Data unreadable or unusable. Good faith acquisition of Personal Data by an employee or agent of the Provider for a legitimate business purpose is not a Breach of Security, provided that the Personal Data is not used for a purposes unrelated to the business or subject to further unauthorized disclosure.
3. The term "Contractor Intellectual Property" means any intellectual property that is owned by the contractor and contained in or necessary for the use of the Deliverables or which the contractor makes available for the State to use as part of the work under the Contract. Contractor Intellectual Property includes COTS or Customized Software owned by the contractor, the contractor's technical documentation, and derivative works and compilations of any Contractor Intellectual Property.
4. The term Commercial Off the Shelf Software ("COTS") means Software provided by the contractor that is intended for general use.
5. The term "Custom Software" means Software and Work Product that is developed by the contractor at the request of the Agency to meet the specific requirements of the Agency and is intended for its use.
6. The term "Customized Software" means COTS that is adapted by the contractor to meet specific requirements of the Agency that differ from the standard requirements of the base product.
7. The term "Deliverable" means the goods, products, Services and Work Product that the contractor is required to deliver to the State under the Contract;
8. The term "End User" means the user of the Provider's solution.
9. The terms "goods" and "products" shall be deemed to include, without limitation, Software and Hardware.
10. The term "Hardware" shall be deemed to include computer equipment and any Software provided with the Hardware that is necessary for the Hardware to operate.
11. The term "Information Technology Contract" shall mean, notwithstanding any definition in New Jersey Statutes, a Contract for one or more of the following: Hardware, Software, Services, telecommunication goods and services, and all related goods.
12. The term "Mobile Device" means any device used by Provider that can move or transmit data, including but not limited to laptops, hard drives, and flash drives.
13. The term "Non-Public Data" means data, other than Personal Data, that is not subject to distribution to the public as public information. Non-Public Data is data that is identified by the State as non-public information or otherwise deemed to be sensitive and confidential by



the State because it contains information that is exempt by statute, ordinance or administrative rule from access by the general public as public information.

14. The term "Personal Data" means:
  - a. "Personal Information" as defined in N.J.S.A. 56:8-161, means an individual's first name or first initial and last name linked with any one or more of the following data elements: (1) Social Security number, (2) driver's license number or State identification card number or (3) account number or credit or debit card number, in combination with any required security code, access code, or password that would permit access to an individual's financial account. Dissociated data that, if linked would constitute Personal Information is Personal Information if the means to link the dissociated were accessed in connection with access to the dissociated data. Personal Information shall not include publicly available information that is lawfully made available to the general public from federal, state or local government records, or widely distributed media.
  - b. data, either alone or in combination with other data, that includes information relating to an individual that identifies the person or entity by name, identifying number, mark or description that can be readily associated with a particular individual and which is not a public record, including but not limited to, Personally Identifiable Information (PII); government-issued identification numbers (e.g., Social Security, driver's license, passport); Protected Health Information (PHI) as that term is defined in the regulations adopted pursuant to the Health Insurance Portability and Accountability Act of 1996, P.L. No. 104-191 (1996) and found in 45 CFR Parts 160 to 164 and defined below; and Education Records, as that term is defined in the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g.
15. The term "Personally Identifiable Information" or "PII," as defined by the U.S. Department of Commerce, National Institute of Standards and Technology, means any information about an individual maintained by an agency, including (1) any information that can be used to distinguish or trace an individual's identity, such as name, social security number, date and place of birth, mother's maiden name, or biometric records; and (2) any other information that is linked or linkable to an individual, such as medical, educational, financial, and employment information,
16. The term "Protected Health Information" or "PHI," has the same meaning as the term is defined in the regulations adopted pursuant to the Health Insurance Portability and Accountability Act of 1996, P.L. No. 104-191 (1996) and found in 45 CFR Parts 160 to 164 means Individually Identifiable Health Information (as defined below) transmitted by electronic media, maintained in electronic media, or transmitted or maintained in any other form or medium. PHI excludes education records covered by the Family Educational Rights and Privacy Act (FERPA), as amended, 20 U.S.C. 1232g, records described at 20 U.S.C. 1232g(a)(4)(B)(iv) and employment records held by a covered entity in its role as employer. The term "Individually Identifiable Health Information" has the same meaning as the term is defined in the regulations adopted pursuant to the Health Insurance Portability and Accountability Act of 1996, P.L. No. 104-191 (1996) and found in 45 CFR Parts 160 to 164 and means information that is a subset of Protected Health Information, including demographic information collected from an individual, and (1) is created or received by a health care provider, health plan, employer or health care clearinghouse; and (2) relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (a) that identifies the individual; or (b) with respect to which there is a reasonable basis to believe the information can be used to identify the individual.
17. The term "Recovery Time Objective" or "RTO," means the maximum tolerable length of time that the Provider's solution may be unavailable after a failure or disaster occurs.
18. The term "Security Incident" means the potential access by non-authorized person(s) to Personal Data or Non-Public Data that the Provider believes could reasonably result in the use, disclosure, or access or theft of State's unencrypted Personal Data or Non-Public Data within the possession or control of the Provider. A Security Incident may or may not turn into a Breach of Security.
19. The term "Service Level Agreement" or "SLA," means the document that is part of the Provider's SFA that typically includes (1) the technical service level performance promises, (i.e. metrics for performance and intervals for measure), (2) description of service quality, (3) identification of roles and responsibilities, (4) security responsibilities and notice requirements, (5) how disputes are discovered and addressed, and (6) any remedies for performance failures.
20. The terms "Services" shall be deemed to include, without limitation (i) Information Technology ("IT") professional services; (ii) Software and Hardware-related services, including without limitation, installation, configuration, and training and (iii) Software and Hardware maintenance and support and/or Software and Hardware technical support services.
21. The term "Software" means, without limitation, computer programs, source codes, routines, or subroutines supplied by the contractor, including operating software, programming aids, application programs, application programming interfaces and software products, and includes COTS, Customized Software and Custom Software, unless the context indicates otherwise.
22. The term "State Data" means all data and metadata created or in any way originating with the State, and all data that is the output of computer processing of or other electronic manipulation of any data that was created by or in any way originated with the State, whether such data or output is stored on the State's hardware, the Provider's hardware or exists in any system owned, maintained or otherwise controlled by the State or by the Provider. State Data includes Personal Data and Non-Public Data.
23. The term "State Intellectual Property" means any intellectual property that is owned by the State. State Intellectual Property includes any derivative works and compilations of any State Intellectual Property.
24. The term "Third Party Intellectual Property" means any intellectual property owned by parties other than the State or the contractor and contained in or necessary for the use of the Deliverables. Third Party Intellectual Property includes COTS owned by Third Parties, and derivative works and compilations of any Third Party Intellectual Property.
25. The term "Work Product" means every invention, modification, discovery, design, development, customization, configuration, improvement, process, Software program, work of authorship, documentation, formula, datum, technique, know how, secret, or intellectual property right whatsoever or any interest therein (whether patentable or not patentable or registerable under copyright or similar statutes or subject to analogous protection) that is specifically made, conceived, discovered, or reduced to practice by the

contractor or the contractor's subcontractors or a third party engaged by the contractor or its subcontractor pursuant to the Contract. Notwithstanding anything to the contrary in the preceding sentence, Work Product does not include State Intellectual Property, Contractor Intellectual Property or Third Party Intellectual Property.

## **B. INDEMNIFICATION FOR STANDARD TECHNOLOGY CONTRACTS**

Section 4.1 Indemnification of the SSTC is deleted in its entirety and replaced with the following:

### **4.1 INDEMNIFICATION**

The Contractor's liability to the State and its employees in third party suits shall be as follows:

- A. The Contractor shall assume all risk of and responsibility for, and agrees to indemnify, defend, and save harmless the State and its officers, agents, servants and employees, from and against any and all third party claims, demands, suits, actions, recoveries, judgments and costs and expenses in connection therewith:
  1. For or on account of the loss of life, property or injury or damage to the person, body or property of any person or persons whatsoever, which shall arise from or result directly or indirectly from the work and/or products supplied under this Contract or the order; and
  2. For or on account of the use of any patent, copyright, trademark, trade secret or other proprietary right of any copyrighted or uncopyrighted composition, secret process, patented or unpatented invention, article or appliance ("Intellectual Property Rights") furnished or used in the performance of this Contract; and
  3. The Contractor's indemnification and liability under subsection (A) is not limited by, but is in addition to the insurance obligations.
- B. In the event of a claim or suit involving third-party Intellectual Property Rights, the Contractor, at its option, may:
  1. procure for the State the legal right to continue the use of the product;
  2. replace or modify the product to provide a non-infringing product that is the functional equivalent; or
  3. in the event that the Contractor cannot do (1) or (2) refund the purchase price less a reasonable allowance for use that is agreed to by both parties.
- C. The State will:
  1. promptly notify Contractor in writing of the claim or suit;
  2. give Contractor shall have control of the defense and settlement of any claim that is subject to Section 4.1(a); provided; however, that the State must approve any settlement of the alleged claim, which approval shall not be unreasonably withheld. The State may observe the proceedings relating to the alleged claim and confer with the Contractor at its expense.
- D. Notwithstanding the foregoing, Contractor has no obligation or liability for any claim or suit concerning third-party Intellectual Property Rights arising from:
  1. the State's unauthorized combination, operation, or use of a product supplied under this Contract with any product, device, or Software not supplied by Contractor;
  2. the State's unauthorized alteration or modification of any product supplied under this Contract;
  3. the Contractor's compliance with the State's designs, specifications, requests, or instructions, provided that if the State provides Contractor with such designs, specifications, requests, or instructions, Contractor reviews same and advises that such designs, specifications, requests or instructions present potential issues of patent or copyright infringement and the State nonetheless directs the Contractor to proceed with one (1) or more designs, specifications, requests or instructions that present potential issues of patent or copyright infringement; or
  4. the State's failure to promptly implement a required update or modification to the product provided by Contractor after the Contractor has given written notice to the State of a need for such an update or modification.
- E. Contractor will be relieved of its responsibilities under Subsection 4.1(a)(i) and (ii) for any claims made by an unaffiliated third party that arise solely from the actions or omissions of the State, its officers, employees or agents.
- F. Subject to the New Jersey Tort Claims Act (N.J.S.A. 59:1-1 et seq.), the New Jersey Contractual Liability Act (N.J.S.A. 59:13-1 et seq.) and the appropriation and availability of funds, the State will be responsible for any cost or damage arising out of actions or inactions of the State, its employees or agents under Subsection 4.1(a)(i) and (ii) which results in an unaffiliated third party claim. This is Contractor's exclusive remedy for these claims;
- G. This section states the entire obligation of Contractor and its suppliers, and the exclusive remedy of the State, in respect of any infringement or alleged infringement of any Intellectual Property Rights. This indemnity obligation and remedy are given to the State solely for its benefit and in lieu of, and Contractor disclaims, all warranties, conditions and other terms of non-infringement or title with respect to any product; and
- H. Furthermore, neither Contractor nor any attorney engaged by Contractor shall defend the claim in the name of the State of New Jersey or any Authorized Purchaser, nor purport to act as legal representative of the State of New Jersey or any Authorized Purchaser, without having provided notice to the Director of the Division of Law in the Department of Law and Public Safety and to the Director of the Division of Purchase and Property. The State of New Jersey may, at its election and expense, assume its own defense and settlement; and
- I. The State of New Jersey will not indemnify, defend, pay or reimburse for claims or take similar actions on behalf of the Contractor.

**C. INSURANCE FOR STANDARD TECHNOLOGY CONTRACTS**

Section 4.2 Insurance of the SSTC is supplemented with the following:

Professional Liability Insurance

The Contractor shall carry Errors and Omissions, Professional Liability Insurance, and/or Professional Liability Malpractice Insurance sufficient to protect the Contractor from any liability arising out the professional obligations performed pursuant to the requirements of this Contract. The insurance shall be in the amount of not less than \$1,000,000 and in such policy forms as shall be approved by the State. If the Contractor has claims-made coverage and subsequently changes carriers during the term of this Contract, it shall obtain from its new Errors and Omissions, Professional Liability Insurance, and/or Professional Malpractice Insurance carrier an endorsement for retroactive coverage.

**D. LIMITATION OF LIABILITY FOR STANDARD TECHNOLOGY CONTRACTS**

Section 4.0 Indemnification and Insurance of the SSTC is supplemented with the following:

**4.3 LIMITATION OF LIABILITY**

The Contractor's liability to the State for actual, direct damages resulting from the Contractor's performance or non-performance of, or in any manner related to this Contract, for any and all claims, shall be limited in the aggregate to 200% of the total value of this Contract. This limitation of liability shall not apply to the following:

- A. The Contractor's obligation to indemnify the State of New Jersey and its employees from and against any claim, demand, loss, damage, or expense relating to bodily injury or the death of any person or damage to real property or tangible personal property, incurred from the work or materials supplied by the Contractor under this Contract caused by negligence or willful misconduct of the Contractor;
- B. The Contractor's breach of its obligations of confidentiality; and
- C. The Contractor's liability with respect to copyright indemnification.

The Contractor's indemnification obligation is not limited by but is in addition to the insurance obligations. The Contractor shall not be liable for special, consequential, or incidental damages.

**E. PERFORMANCE GUARANTEE OF THE CONTRACTOR**

Section 5.11 Performance Guarantee of the Contractor of the SSTC is supplemented with the following:

1. COTS and Customized Software

- a. Unless the Contractor Standard Form Agreement provides greater coverage as determined by the State, in its sole discretion, the contractor warrants that COTS and Customized Software products licensed to the State shall operate in all material respects as described in the Solicitation and/or contractor technical documentation for ninety (90) days after Acceptance. The State shall notify the contractor of any COTS or Customized Software product deficiency within ninety (90) days after Acceptance. For a Contract requiring the delivery of COTS or Customized Software and Custom Software, a notice within one hundred eighty (180) days that describes a deficiency in functional terms without specifying whether the deficiency is with COTS, Customized Software or Custom Software shall be deemed a notice that triggers the warranty provisions in both Section 5.11(a) and 5.11(b) of this Supplement.
- b. Except for the portion of the contractor's COTS or Customized Software product that intentionally contains one or more of the following for the purpose of anti-virus protection, the contractor warrants that, at the time of delivery and installation of the COTS or Customized Software provided pursuant to the Contract, its product shall be free of what are commonly defined as viruses, backdoors, worms, spyware, malware and other malicious code that will hamper performance of the COTS or Customized Software, collect unlawful personally identifiable information on users, or prevent the COTS or Customized Software from performing as required under the Contract.
- c. In the event of any breach of this warranty, the contractor shall correct the product errors that caused the breach of warranty, or if the contractor cannot substantially correct such breach in a commercially reasonable manner, the State may end its usage and recover the fees paid to the contractor for the license and any unused, prepaid, technical support fees paid. Under no circumstances does this warranty provision limit the contractor's obligation in the event of a breach of confidentiality.
- d. The contractor does not warrant that COTS or Customized Software is error-free or that it will operate uninterrupted.

2. Custom Software

- a. Unless the Contractor Standard Form Agreement provides greater coverage, as determined by the State, in its sole discretion, the contractor warrants that Custom Software Deliverables shall operate in all material respects as described in the applicable specification documentation for one hundred and eighty (180) days after Acceptance. The State shall notify the contractor of any Custom Software deficiency within one hundred and eighty (180) days after Acceptance of the Custom Software Deliverable (the "Notice Period"). Where the contractor is providing multiple Custom Software Deliverables over the term of the Contract, the Notice Period shall begin to run after the Acceptance of the final Custom Software Deliverable under the Contract. At that time, the State may assert defect claims relating to any and all of the Custom Software Deliverables provided under the Contract; however, the State may also assert claims earlier, in its discretion, without waiving the Notice Period.
- b. For a Contract requiring the delivery of COTS or Customized Software and Custom Software, a notice within one hundred eighty (180) days that describes a deficiency in functional terms without specifying whether the deficiency is with COTS, Customized

Software or Custom Software shall be deemed a notice that triggers the warranty provisions in both Section 5.11(a) and 5.11(b) of this Supplement.

- c. The contractor warrants that, at the time of Acceptance of the Custom Software Deliverable provided pursuant to the Contract, its product shall be free of what are commonly defined as viruses, backdoors, worms, spyware, malware and other malicious code that will hamper performance of the Custom Software, collect unlawful personally identifiable information on users, or prevent the Custom Software from performing as required under the Contract. Under no circumstances does this warranty provision limit the contractor's obligation in the event of a breach of confidentiality.
  - d. In the event of any breach of this warranty, the contractor shall correct the Custom Software errors that caused the breach of warranty, or if the contractor cannot substantially correct such breach in a commercially reasonable manner, the State may recover a portion of the fees paid to the contractor for the Custom Software with the uncorrected defect or in the event that the Custom Software is still deemed, by the State in its sole discretion, to be usable by the State even with the uncorrected defect, the State may recover a portion of the fees paid to the contractor for the Custom Software (up to the total amount of such charges for such Custom Software) to reflect any reduction in the value of the Custom Software Deliverable as a result of the uncorrected defect. Under no circumstances does this warranty provision limit the contractor's obligations in the event of a breach of confidentiality.
  - e. The contractor does not warrant that Custom Software is error-free or that it will operate uninterrupted.
3. IT Services
- a. Unless the Contractor Standard Form Agreement provides greater coverage, as determined by the State, in its sole discretion, the contractor warrants that all Services will be provided in a professional manner consistent with industry standards. The State shall notify the contractor of any Services warranty deficiencies within ninety (90) days from performance of the deficient Services.
  - b. In the event of any breach of this warranty, the contractor shall re-perform the deficient Services, or if the contractor cannot substantially correct a breach in a commercially reasonable manner, the State may end the relevant Services and recover the fees paid to the contractor for the deficient Services.
4. Hardware
- a. Unless the Contractor Standard Form Agreement provides greater coverage, as determined by the State, in its sole discretion, the contractor warrants that the equipment offered is standard new equipment, and is the manufacturer's latest model in production, with parts regularly used for the type of equipment offered; that such parts are all in production and not likely to be discontinued; and that no attachment or part has been substituted or applied contrary to manufacturer's recommendations and standard practice.
  - b. The contractor warrants that all equipment supplied to the State and operated by electrical current is UL listed where applicable.
  - c. The contractor warrants that all new machines are to be guaranteed as fully operational for one (1) year from time of Acceptance by the State. For the avoidance of doubt, Acceptance with respect to Hardware in this subsection (d) shall occur no later than sixty (60) days after delivery, as evidenced by a signed delivery receipt. The contractor shall render prompt service without charge, regardless of geographic location.
  - d. The contractor warrants that sufficient quantities of parts necessary for proper service to equipment shall be maintained at distribution points and service headquarters.
  - e. The contractor warrants that trained mechanics are regularly employed to make necessary repairs to equipment in the territory from which the service request might emanate within a 48-hour period or within the time accepted as industry practice.
  - f. The contractor warrants that all Software included with the Hardware shall perform substantially in accordance with specifications, for one (1) year from the time of Acceptance. The contractor warrants that Software media will be free from material defects in materials and workmanship for a period of one (1) year from the date of Acceptance.
  - g. In the event of any breach of this warranty, the contractor shall promptly repair, replace or refund the purchase price of product rejected for failure to conform with the contractor's product specifications.
5. THE WARRANTIES SET FORTH HEREIN ARE EXCLUSIVE AND IN LIEU OF ALL OTHER WARRANTIES, WHETHER EXPRESS OR IMPLIED, AND THE CONTRACTOR EXPRESSLY DISCLAIMS ALL OTHER WARRANTIES, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY, OR FITNESS FOR A PARTICULAR PURPOSE.

**V. ADDITIONS TO THE STANDARD TERMS AND CONDITIONS FOR ALL INFORMATION TECHNOLOGY CONTRACTS WHICH INCLUDE SOFTWARE AS A SERVICE (SAAS)/CLOUD SOLUTION**

**A. ADDITIONAL TERMS FOR A CONTRACTOR'S DATA PROTECTION OBLIGATIONS**

1. Data Ownership: The State will own all right, title and interest in its State Data that is related to the services provided by this contract. The Provider shall not use or access State user accounts or State Data, except (i) in the course of data center operations, (ii) in response to service or technical issues, (iii) as required by the express terms of this contract, or (iv) at the State's written request.

Provider shall not collect, access, or use State Data except as strictly necessary to provide its solution to the State. No information regarding the State's use of the solution may be disclosed, provided, rented or sold to any third party for any reason unless required by law or regulation or by an order of a court of competent jurisdiction. This obligation shall survive and extend beyond the term of this contract.

2. Data Protection: Protection of personal privacy and data shall be an integral part of the business activities of the Provider to ensure that there is no inappropriate or unauthorized use of State Data at any time. To this end, the Provider shall safeguard the confidentiality, integrity, and availability of State Data and comply with the following conditions:

- a. The Provider shall implement and maintain appropriate administrative, technical and organizational security measures to safeguard against unauthorized access, disclosure or theft of Personal Data and Non-Public Data. Such security measures shall be in accordance with recognized good industry practice and not less stringent than the measures the Provider applies to its own Personal Data and Non-Public Data of similar kind.
  - b. All Personal Data shall be encrypted at rest and in transit with controlled access. Provider is responsible for encryption of the Personal Data. The level of protection and encryption for all Personal Data shall be identified and made a part of this contract.
  - c. Provider shall encrypt all Non-Public Data at rest and in transit. The level of protection and encryption for all Non-Public Data shall be identified and made a part of this contract.
  - d. Personal Data shall not be stored on Mobile Devices. Where Mobile Devices are required for Provider to accomplish the work, the Provider shall ensure the Mobile Device is hard drive encrypted consistent with validated cryptography standards as referenced in FIPS 140-2, Security Requirements for Cryptographic Modules for all Personal Data.
  - e. At no time shall any data or processes, which either belongs to or are intended for the use of State or its officers, agents, or employees, be copied, disclosed, or retained by the Provider or any party related to the Provider for subsequent use in any capacity that does not include the State.
3. Data Location: Provider shall provide its services to State and its End Users solely from data centers in the U.S. Storage of State Data at rest shall be located solely in data centers in the U.S. Provider shall not allow its personnel or contractors to store State Data on Mobile Devices, including personal computers, except for devices that are used and kept within the physical structure of its U.S. data centers. Provider shall permit its personnel and contractors to access State Data remotely only as required to provide technical support or upon prior notice and approval. The Provider may provide technical user support on a seven-day by 24-hour basis, unless otherwise prohibited in this contract.
4. Security Incident and Breach of Security Responsibilities.
- a. Security Incident Reporting Requirements: Once Provider reasonably determines that a Security Incident occurred, the Provider shall report a Security Incident to the appropriate State identified contact within 24 hours by the agreed upon method as defined in the contract. Provider will provide the State regular updates and all available relevant information including a description of the incident and those measures taken by Provider in response to the Security Incident.
  - b. Breach of Security Reporting Requirements: If the Provider confirms or reasonably believes that there has been a Breach of Security, the Provider shall (1) immediately notify the appropriate State identified contact by the agreed upon method within 24 hours, unless a shorter time is required by applicable law, (2) take commercially reasonable measures to address and investigate the Breach of Security in a timely manner and (3) cooperate with the State as reasonably requested by the State and/or law enforcement to investigate and resolve the Breach of Security. Provider will provide the State regular updates and all available information to assist the State with notification to law enforcement and third parties as required by applicable law, including a description of the Breach of Security and those measures taken by Provider in response to the Breach of Security.
  - c. Incident Response: When commercially reasonable to do so, Provider may communicate with outside parties regarding a Security Incident, which may include contacting law enforcement, fielding media inquiries (subject to preapproval by the State if Provider specifically identifies the State or State Data), and seeking external expertise as mutually agreed at the time, defined by law, or contained in the SLA. Discussing Security Incidents with the State should be handled on an urgent as needed basis, as part of Provider communication and mitigation processes as mutually agreed at the time, defined by law, or contained in the SLA.
  - d. Following a Security Incident or Breach of Security, Provider shall promptly implement necessary remedial measures, if necessary, and document responsive actions taken related to the Security Incident or Breach of Security, including any post-incident review of events and actions taken to make changes in business practices in providing the services, if necessary.
5. Termination and Suspension of Service:
- a. In the event of termination of the contract, the Provider shall implement an orderly return of State Data in a mutually agreeable format and the subsequent secure disposal of State Data remaining in Provider's possession.
  - b. Suspension of services: During any period of suspension, the Provider shall not take any action to intentionally erase any State Data.
  - c. Unless otherwise stipulated, in the event of termination of any services, SLA, or this contract in its entirety, the Provider shall not take any action to intentionally erase any State Data for a period of:
    - 1) 10 business days after the effective date of termination, if the termination is in accordance with the expiration of the defined contract term;
    - 2) 30 business days after the effective date of termination, if the termination is for convenience; or
    - 3) 60 business days after the effective date of termination, if the termination is for cause.

After such period, the Provider shall have no obligation to maintain or provide any State Data and shall thereafter, unless legally prohibited, delete all State Data in its systems or otherwise in its possession or under its control in accordance with subsection (e) below.

- d. Post-Termination Assistance: The State shall be entitled to any post-termination assistance with respect to the services unless a unique data retrieval arrangement has been established as part of the contract.
- e. Secure Data Disposal: When requested by the State, the provider shall destroy all requested data in all of its forms, including but not limited to: disk, CD/DVD, backup tape, and paper. Data shall be permanently deleted and shall not be

recoverable, according to National Institute of Standards and Technology (NIST) approved methods and certificates of destruction shall be provided to the State.

6. **Background Checks:** The Provider shall conduct criminal background checks and not utilize any staff, including sub-contractors, to fulfill the obligations of the contract who has been convicted of any crime of dishonesty, including but not limited to criminal fraud, or otherwise convicted of any felony or any misdemeanor offense for which incarceration for up to 1 year is an authorized penalty. The Provider shall promote and maintain an awareness of the importance of securing the State's Data among the Provider's employees and agents.
7. **Access to security logs and other reports:** The Provider shall provide logs and reports to the State in a format as specified in the contract and agreed to by both the Provider and the State. Reports shall include latency statistics, user access, user access IP address, user access history and security logs for all State Data related to this contract, including but not limited to data, file management, transactions, or tools used to provide, manage, secure, or analyze the State's Data. The Provider shall maintain the reports and logs for the contract term and for two (2) years after the conclusion of the term, and shall provide them to the State in the course of a State audit or upon written request from the State.
8. **Service Level Audit:** The Provider shall allow the State to audit conformance to the contract terms. The State may perform this audit or contract with a third party at its discretion, at the State's expense.
9. **Data Center Audit:** The Provider shall have an independent third party audit of its data center(s) performed at least annually at their own expense, and provide the audit report to the State upon request.
10. **Change Control and Advance Notice:** The Provider shall give advance notice to the State of any upgrades (e.g. major upgrades, minor upgrades, system changes) that may impact service availability and performance. Said notice shall be provided at least thirty days in advance of the upgrade, unless otherwise agreed in the SLA.
11. **Security:** The Provider shall disclose its non-proprietary security processes and technical limitations to the State by completing the State's Security Controls Checklist or equivalent system security document, available upon request from the Office of Information Technology, as updated from time to time, such that adequate protection and flexibility can be attained between the State and the Provider.
12. **Non-disclosure and Separation of Duties:** The Provider shall enforce separation of job duties, require commercially reasonable non-disclosure agreements, and limit staff knowledge of State Data to that which is absolutely needed to perform job duties.
13. **Import and Export of Data:** The State shall have the ability to import or export data in piecemeal or in entirety at its discretion without interference from the Provider. This includes the ability for the State to import or export data to/from other Providers.
14. **Responsibilities and Uptime Guarantee:** The Provider shall be responsible for the acquisition and operation of all hardware, software, and network support related to the services being provided. The technical and professional activities required for establishing, managing, and maintaining the environment are the responsibilities of the Provider. The system shall be available 24 hours per day, 365 days per year (with agreed-upon maintenance downtime), and Provider shall provide service to the State as defined in the Service Level Agreement.
15. **Right to Remove Individuals:** The State shall have the right at any time to require that the Provider remove from interaction with the State any Provider representative who the State believes is detrimental to its working relationship with the Provider. The State will provide the Provider with notice of its determination, and the reasons it requests the removal. If the State signifies that a potential security violation exists with respect to the request, the Provider shall immediately remove such individual. The Provider shall not assign the person to any aspect of the contract or future work orders without the State's consent.

**Business Continuity and Disaster Recovery:** The Provider shall provide a business continuity and disaster recovery plan upon request and ensure that the State's Recovery Time Objective (RTO) is met. The RTO shall be defined in the SLA.

## **B. INDEMNIFICATION FOR SAAS**

Section 4.1 Indemnification of the SSTC is deleted in its entirety and replaced with the following;

### **4.1 INDEMNIFICATION**

- A. **CONTRACTOR RESPONSIBILITIES** - The Contractor's liability to the State and its employees in third party suits shall be as follows:
  1. The Contractor shall indemnify, defend, and save harmless the State and its officers, agents, servants and employees, from and against any and all third party claims, demands, suits, actions, recoveries, judgments and costs and expenses in connection therewith:
    - i. For or on account of the loss of life, tangible property (not including lost or damaged data) or injury or damage to the person, body or property (not including lost or damaged data) of any person or persons whatsoever, which shall arise from or result directly or indirectly from the work and/or products supplied under this Contract; and

- ii. For or on account of the use of any patent, copyright, trademark, trade secret or other proprietary right of any copyrighted or uncopied composition, secret process, patented or unpatented invention, article or appliance ("Intellectual Property Rights") furnished or used in the performance of the contract; and
  - iii. For or on account of a Breach of Security resulting from Contractor's breach of its obligation to encrypt Personal Data or otherwise prevent its release or misuse; and
  - iv. The Contractor's indemnification and liability under Section 4.1(A)(1) is not limited by, but is in addition to the insurance obligations contained in Section 4.2 of the State Standard Terms and Conditions.
2. In the event of a claim or suit involving third-party Intellectual Property Rights, the Contractor, at its option, may: (1) procure for the State the legal right to continue the use of the product; (2) replace or modify the product to provide a non-infringing product that is the functional equivalent; or (3) refund the purchase price less a reasonable allowance for use that is agreed to by both parties. The State will: (1) promptly notify Contractor in writing of the claim or suit; (2) Contractor shall have control of the defense and settlement of any claim that is subject to Section 4.1(A)(1); provided, however, that the State must approve any settlement of the alleged claim, which approval shall not be unreasonably withheld. The State may observe the proceedings relating to the alleged claim and confer with the Contractor at its expense. Furthermore, neither Contractor nor any attorney engaged by Contractor shall defend the claim in the name of the State of New Jersey, nor purport to act as legal representative of the State of New Jersey, without having provided notice to the Director of the Division of Law in the Department of Law and Public Safety and to the Director of DPP. The State of New Jersey may, at its election and expense, assume its own defense and settlement.
  3. Notwithstanding the foregoing, Contractor has no obligation or liability for any claim or suit concerning third-party Intellectual Property Rights arising from: (1) the State's unauthorized combination, operation, or use of a product supplied under this contract with any product, device, or software not supplied by Contractor; (2) the State's unauthorized alteration or modification of any product supplied under this contract; (3) the Contractor's compliance with the State's designs, specifications, requests, or instructions, provided that if the State provides Contractor with such designs, specifications, requests, or instructions, Contractor shall review same and advise if such designs, specifications, requests or instructions present potential issues of patent or copyright infringement and the State nonetheless directs the Contractor to proceed with one or more designs, specifications, requests or instructions that present potential issues of patent or copyright infringement; or (4) the State's failure to promptly implement a required update, use a new version of the product, or to make a change or modification to the product if requested in writing by Contractor.
  4. Contractor will be relieved of its responsibilities under Subsection 4.1(A)(1)(i), (ii), and (iii) for any claims made by an unaffiliated third party that arise solely from the actions or omissions of the State, its officers, employees or agents.
  5. This section states the entire obligation of Contractor and the exclusive remedy of the State, in respect of any infringement or alleged infringement of any Intellectual Property Rights. This indemnity obligation and remedy are given to the State solely for its benefit and in lieu of, and Contractor disclaims, all warranties, conditions and other terms of non-infringement or title with respect to any product.
  6. The provisions of this indemnification clause shall in no way limit the Contractor's obligations assumed in the Contract, nor shall they be construed to relieve the Contractor from any liability, nor preclude the State from taking any other actions available to it under any other provisions of the contract or otherwise at law or equity.
  7. The Contractor agrees that any approval by the State of the work performed and/or reports, plans or specifications provided by the Contractor shall not operate to limit the obligations of the Contractor assumed in the Contract.
  8. The State of New Jersey will not indemnify, defend or hold harmless the Contractor. The State will not pay or reimburse for claims absent compliance with Section 4.1(B) below and a determination by the State to pay the claim or a final order of a court of competent jurisdiction.
- B. STATE RESPONSIBILITIES - Subject to the New Jersey Tort Claims Act (N.J.S.A. 59:1-1 et seq.), the New Jersey Contractual Liability Act (N.J.S.A. 59:13-1 et seq.) and the appropriation and availability of funds, the State will be responsible for any cost or damage arising out of actions or inactions of the State, its employees or agents under Section 4.1(A)(1)(i), (ii), and (iii) which results in an unaffiliated third party claim. This is Contractor's exclusive remedy for these claims.

**B. INSURANCE FOR SAAS**

Section 4.2 Insurance of the SSTC is supplemented with the following:

1. Professional Liability Insurance  
The Contractor shall carry Errors and Omissions, Professional Liability Insurance, and/or Professional Liability Malpractice Insurance sufficient to protect the Contractor from any liability arising out the professional obligations performed pursuant to the requirements of this Contract. The insurance shall be in the amount of not less than \$1,000,000 and in such policy forms as shall be approved by the State. If the Contractor has claims-made coverage and subsequently changes carriers during the term of this Contract, it shall obtain from its new Errors and Omissions, Professional Liability Insurance, and/or Professional Malpractice Insurance carrier an endorsement for retroactive coverage.
2. Cyber Breach Insurance  
The Contractor shall carry Cyber Breach Insurance in sufficient to protect the Contractor from any liability arising out of its performance pursuant to the requirements of this Contract. The insurance shall be in an amount of not less than \$2,000,000 in such policy forms as shall be approved by the State. The insurance shall at a minimum cover the following: Data loss, ransomware and similar breaches to computers, servers and software; Protection against third-party claims; cost of notifying affected parties; cost of providing credit

monitoring to affected parties; forensics; cost of public relations consultants; regulatory compliance costs; costs to pursue indemnity rights; costs to Data Breach and Credit Monitoring Services analyze the insured's legal response obligations; costs of defending lawsuits; judgments and settlements; regulatory response costs; costs of responding to regulatory investigations; and costs of settling regulatory claims.

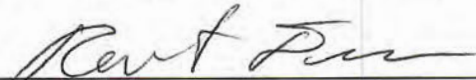
**C. LIMITATION OF LIABILITY FOR SAAS**

Section 4.0 Indemnification and Insurance of the SSTC is supplemented with the following:

**4.3 LIMITATION OF LIABILITY**

- A. The Contractor's liability for actual, direct damages resulting from the Contractor's performance or non-performance of, or in any manner related to, the Contract for any and all third party claims, shall be limited in the aggregate to 200% of the fees paid by the State during the previous twelve months to Contractor for the products or services giving rise to such damages. Notwithstanding the preceding sentence, in no event shall the limit of liability be less than \$1,000,000. This limitation of liability shall not apply to the following:
- i. The Contractor's indemnification obligations as described in Section 4.1; and
  - ii. The Contractor's breach of its obligations of confidentiality described in this Bid Solicitation.
- A. Notwithstanding the foregoing exclusions, where a Breach of Security is a direct result of Contractor's breach of its contractual obligation to encrypt Personal Data pursuant to this Bid Solicitation or otherwise prevent its release as reasonably determined by the State, the Contractor shall bear the costs associated with (1) the investigation and resolution of the Breach of Security; (2) notifications to individuals, regulators, or others required by federal and state laws or as otherwise agreed to; (3) a credit monitoring service required by state or federal law or as otherwise agreed to; (4) a website or a toll-free number and call center for affected individuals required by federal and state laws — all not to exceed the average per record, per person cost calculated for data breaches in the United States in the most recent Cost of Data Breach Study: Global Analysis published by the Ponemon Institute for the public sector at the time of the Breach of Security; and (5) completing all corrective actions as reasonably determined by Contractor based on root cause of the Breach of Security.
- B. The Contractor shall not be liable for punitive, special, indirect, incidental, or consequential damages.

**I HEREBY ACCEPT THE TERMS AND CONDITIONS OF THIS CONTRACT**

  
\_\_\_\_\_  
Signature

**5/10/2022**

\_\_\_\_\_  
Date

**Robert Feurer, CEO**

\_\_\_\_\_  
Print Name and Title

**CertiSurv, LLC**

\_\_\_\_\_  
Print Name of Contractor



Attachments 4 through 14 are internal documents that are not public records pursuant to N.J.S.A. 47:1a-1.1 as they constitute intra-agency advisory, consultative, or deliberative material.

## Attachment 15

### Staff Resumes

Please see staff resumes following this page.

# Jessica Lima, RN



[Redacted]



[Redacted]



[linkedin.com/in/limajessica](https://www.linkedin.com/in/limajessica)

## Summary

Jessica is a Registered Nurse and has been a long-term care surveyor since 2007. With a background in law, and a mission to improve patient care especially for the elderly, a passion was found. After valuable direct patient care experience, she began her career in health care regulation. She worked in state agency settings in California and North Carolina, as a Traditional and QIS Surveyor, investigating some of the most challenging and high profile cases. She served as a team leader, new surveyor preceptor and a member of the state's informal dispute resolution panel. She was also chosen by CMS to be a writer for the Surveyor Minimum Qualification Test. Jessica is proud to be a part of the CertiSurv team, to continue her efforts to improve the lives of the most vulnerable.

## Experience



### Director of Survey Operations

CertiSurv, LLC

Jun 2020 - Present (9 months +)

- Supervise and direct the staff responsible for surveying health care facilities and enforcing licensing and certification standards in accordance with State, Federal, and local laws and regulations.
- Supervise and direct the training coordinators, QA Analysts and IDR panel.
- Evaluate surveyor performance by determining effectiveness in enforcing applicable medical care standards and regulations.
- Counsel surveyors for the purposes of improving performance and productivity.
- Resolve concerns arising from surveys disputed by facility management.
- Preside at staff and training meetings.
- Representative when interfacing with officials of governmental health agencies.



### Senior Health Facilities Surveyor/QA Analyst

CertiSurv, LLC

Jan 2020 - Jun 2020 (6 months)

- Provide direction and support to surveyors responsible for surveying and investigating health care facilities and enforcing licensing and certification standards in accordance with State, Federal, and local laws and regulations concerning total patient care.
- Conducted surveys and inspections.
- QA Analyst responsible for the review of survey reports for the quality of the investigation, thoroughness of the report, and deficiencies appropriately cited.



### Health Facilities Surveyor/QA Analyst

CertiSurv, LLC

Oct 2019 - Jan 2020 (4 months)

- Surveyed and investigated skilled nursing facilities in multiple states to enforce Federal, State and local licensing and certification requirements relating to medical care.

- QA Analyst responsible for the review of survey reports for the quality of the investigation, thoroughness of the report, and deficiencies appropriately cited.



### **Health Facilities Surveyor/Operations Manager**

Healthstream/Providigm

Jun 2011 - Jan 2020 (8 years 8 months)

- Traveled nationwide to train nursing homes on the use and implementation of a Quality Assurance/Performance Improvement web-based application.
- Educated providers on the nursing home inspection process.
- Developed an online on-demand training program.
- Scripted, produced, recorded, and edited all online training videos on demand for our clients.
- Performed mock surveys.
- Surveyed and investigated skilled nursing facilities in multiple states to enforce Federal, State and local licensing and certification requirements relating to medical care.



### **Facility Survey Consultant/SMQT Writer and Contributor**

NC Department of Health and Human Services

Aug 2008 - Jun 2011 (2 years 11 months)

- Traditional and QIS Surveyor.
- Preceptor for new surveyors.
- Chosen by CMS to be a SMQT writer/contributor.
- Member of the IDR panel.
- Surveyed and investigated skilled nursing facilities to enforce Federal, State and local licensing and certification requirements relating to medical care.
- Served as a Team Leader and investigator for the most high profile cases.



### **Health Facilities Evaluator Nurse**

California Department of Public Health

Jul 2007 - Aug 2008 (1 year 2 months)

- Surveyed, investigated, and inspected skilled nursing facilities to enforce Federal, State and local licensing and certification requirements relating to medical care.
- Served as a Team Leader.



### **Case Manager/Travel Nurse**

American Mobile Healthcare

Aug 2005 - Jul 2007 (2 years)

- Coordinated and managed the care of 12+ patients at any given time.
- Developed, evaluated, and adjusted the patient's Plan of Care, as indicated.
- Provided patient/family education and support regarding end of life care.
- Collaborated with physicians and staff regarding patients' changing condition during IDT meetings.



### **Nurse Educator/Case Manager**


Heart to Heart Hospice

Jul 2003 - Aug 2005 (2 years 2 months)

- Preceptor/Evaluator for all nursing staff.

- Developed an orientation program for a startup organization.
- Provided orientation and in-field training for newly hired nursing staff.
- Developed, coordinated and presented trainings in SNFs and for the provider community.
- Actively participated in coordination of all aspects of patient's care, as needed.

## Licenses & Certifications

 **Registered Nurse** - California Board of Registered Nursing

## Skills

Nursing • Healthcare • Direct Patient Care • Customer Service • Public Speaking • Cardiopulmonary Resuscitation (CPR) • Home Care • Inpatient • Leadership • Management

Tim Pickens

[REDACTED]

[REDACTED]

[REDACTED]

Professional Summary:

Accomplished Registered Nurse with 25 years' experience currently serving as the Regional Regulatory administrator for the Tn. Dept of Health Middle Tn. Region. 12 years Regulatory Survey experience, SMQT certified, Served as State Survey Preceptor, corporate Mock Regulatory surveyor/Instructor 11 states. Diverse background in nursing to include 14 years of work in the Emergency Room and Intensive care unit, Rapid Response Team Leader, ACLS and PALS Instructor, ACLS and PALS class coordinator, Cardiac Rehab, Medical Office Nurse Manager, Director of Nursing in hospital and Long-Term Care setting, Post Anesthesia Recovery Unit, neurosurgical Team, Corporate Regulatory Nurse consultant for Nursing Home chain in 11 states, Federally certified State surveyor, State of Tn. Surveyor Preceptor/Instructor, currently serving as the Regional Regulatory Administrator for the Tn. Dept. of Health over 36 counties. Currently serving on the Tn. Board of Health and as a member of the Board for the prevention of elder abuse. I have served the past 12 years in upper-level Nurse Management positions.

Skills:

Executive Team Leadership

Staff Development

Policy writing

Quality Assurance/ Process Improvement certified

Adult Educator certified

Corporate Nurse consulting

Eden Alternative certified

Infection Control Nurse LTC

Medical Office Nurse Supervisor

Scheduling

Emergency Room equipment

EKG/EKG monitoring/interpretation

Blood product administration

Code protocol

Emergency Room care protocol

Iv insertion and maintenance

OR protocol

Phlebotomy protocol

Cardiac Rehab Protocol

PACU protocol

ICU/Critical Care protocol

CNA educator/trainer

JAHCO survey preparedness

Work History:

Tn. Dept of Health 2017 to present: Current Regional Regulatory Administrator

Tn. Dept of health: Preceptor/ Instructor for the State Survey teams

Tn. Dept of Health State Regulatory Surveyor

Corporate Regulatory Surveyor Instructor 11 States

Signature Health Care Inc. 2009-2017:

LTC Director of Nursing with 5 Gold Survey history.

Infection Control Nurse

Eden Alternative Instructor

CNA Instructor

Regulatory Nurse Consultant 11 States

LTC Nurse Consultant KY., and TN.

Westlake Regional Hospital 2008-2009:

Intensive Care Unit day shift RN

Somerset Regional Hospital 2007-2008:

PACU RN

Neurosurgical Team RN

TJ Sampson Hospital 2005-2007:

Rapid Response Team Leader Day Shift

ICU RN

ACLS/PALS Instructor with Peggy Allen

Westlake Hospital/Westlake Primary Care 1990-2005

RN Emergency Room

DON satellite locations prn

RN ICU

RN medical office

ACLS/PALS Instructor

ACLS/PALS class coordinator

Cardiac Rehab RN

Emergency room tech.



OR tech.

C.N.A.

Education:

Associate Science Registered Nurse

Masters Science Nursing Administration

Associates Social Science

Private Investigator

Masters Taxidermist

Ordained Minister

Hobbies:

Spending time with my family

Hunting

Taxidermy

Teaching self- defense classes

References:

Beverly Lowery masters prepared RN, LNHA

[REDACTED]

Tamra Turberville

[REDACTED]

Paula Tipton

[REDACTED]

Other References available upon request

# Patrick Campbell, RN BSN



## Objective

To secure a position in Long-term Care to provide survey readiness, regulatory compliance, and a robust quality assurance/performance improvement program to ensure quality care is provided to the residents we serve. To be part of an interdisciplinary team to ensure care is exceptional in quality and fiscally responsible.

## Qualifications

Over 7 years of experience managing national accounts. Maintaining relationships with corporate staff to provide guidance and data on managing quality assurance across multiple regions and States nationwide. Work along side sales/marketing and development teams to attract and retain customer base.

Extensive experience in public speaking to small groups up to hundreds of participants. This includes training software, education on regulatory issues.

Daily use of webinar software to provide trainings to individuals and multiple groups.

Ten years of experience training, implementing, and providing support for hundreds of long-term care centers utilizing abaqis software.

Certified as 1 of 10 QIS Master Trainers by CMS.

Certified QIS trainer for North Carolina. Coordinated and participated in training and evaluating surveyors using the QIS process.

State of North Carolina surveyor of Long-term Care facilities for 6 years. Enforcing Centers for Medicaid/Medicare (CMS) Federal regulations for annual recertification and complaint surveys. Training in State regulations for assisted living and rest home beds.

Passed the federal qualification test (SMQT) to work independently as a surveyor showing in depth knowledge of federal regulations.

Licensed as a Registered Nurse from since 1993 with experience as an ADON and DON in LTC.

## Education

CDC certified Infection Preventionist 2020

New LCTSP training for the new annual survey- 2017

Completed Bachelor's Degree in Nursing from University of North Carolina-Wilmington- 2014

Completed level 1 and level 2 training by The Council on Licensure, Enforcement and Regulation (CLEAR) on advanced investigative analysis, interviewing and report development.

Completed Long Term Care CMS Basic Training for Surveyors- 2003

Completed the Associates Degree in Nursing from Robeson Community College- 1993.

## Relevant Experience

July 2020- Present- Training Coordinator Certisurv- Provide training for new surveyors and oversight and training updates for experienced surveyors. Conduct Informal Dispute Resolution (IDR) hearings and render opinions, assist with quality assurance reviews of investigations and cited deficiencies. Complete regulatory surveys in skilled nursing and assisted living facilities.

March 2015-July 2020- Senior Abaqis Operations Manager, HealthStream (formerly Providigm)-Work with large nursing home chains (100 plus homes) to train, implement and effectively use Abaqis software to increase quality of care and meet CMS requirements for QAPI. Responsibilities include onsite and web-based training and continual support related to best practice for optimal outcomes. Also work with the support team to develop special reports per customer request and communicate with the Director of Software to make improvements to software when requested by the customer. Assist customers with regulatory compliance before and after State surveys.

July 2013-March 2015- Director of Client Experience, Providigm (formerly Nursing Home Quality)-Manage a staff of 5 Client Support Specialist providing phone and electronic support for customers using Abaqis (QA software). Work with Directors of Software Development, IT, Marketing and Human Resources on maintaining equipment, budgeting for training and phone coverage and marketing strategies. Provide analysis of use of product and retraining options to existing customers from single facilities to corporations of more than 100 long term care homes.

January 2010-July 2013- Master QIS trainer. Nursing Home Quality- Provide training and compliance testing to Federal Surveyors and States as they implement the Quality Improvement Survey process as directed by the Centers for Medicare and Medicaid Services (CMS). Assisted in feasibility testing, development, and training of Inspectors in Ontario Canada. Set up and train nursing homes and their staff on the use of Abaqis; a consumer version of the QIS process facilities use to supplement their QA program.

January 2010-Present- Long-term Care Surveyor- enforcing Federal regulations and citing deficiencies during annual recertification surveys for States under contract with Providigm. Current on all CMS training on the new Long-term Care Survey Process.

September 2009- December 2009- Director of Nursing for Silver Stream Health and Rehabilitation. A 110 bed sub-acute rehab and long-term care facility. Supervise the nursing management team and the care for all residents. Serve on multiple committees including QA&A and Action Teams. Ensure supply and staffing budgets are adhered to.

June 2003 to September 2009- Long-term care surveyor for the State of North Carolina enforcing Federal regulations, citing deficiencies, and reviewing plans of correction. Work independently as a sole investigator and team lead groups of investigators. Travel to facilities over the eastern and central areas of North Carolina. Chart audits from admission through discharge to ensure proper care was provided medically, socially, and financially. Observe care by facility staff. Review and approve or assist the facility in providing an acceptable plan of correction for cited deficiencies. Conduct follow up surveys to determine compliance following deficiency citations. Serve as a panel member for Informal Dispute Resolution. Have testified multiple times in court cases appealed to the Administrative Law Judge. Type reports and submit reports following strict time frames. QIS trainer-part of a 4-person team in the State on North Carolina certified to teach the new survey process to the surveyors in North Carolina.

November 2006 to September 2009- Emergency room staff nurse at a Level 2 trauma center- New Hanover Regional Medical Center- Wilmington, NC. Provide emergency assessments and care to patients of all ages. Use of BLS and ACLS skills, phlebotomy, medication administration and documentation.

November 2002 to June 2003- Assistant Director of Nurses- Liberty Commons of Columbus County- Whiteville, NC. Supervision of 65 staff including nurses and nursing assistants. Staff scheduling and evaluations. In charge of Pressure Sore Team, on QA committee. Review charts for appropriate and complete nursing, physician, and pharmacy documentation.

October 2001 to November 2006- Emergency room staff nurse- Columbus Regional Medical Center- Whiteville, NC. Provide primary emergency care in a community emergency room. Provide BLS and ACLS care, assess, treat, and document all interventions.

March 1995 to November 2003- Nursing Supervisor- North Carolina Department of Corrections- Brunswick, NC. Supervise a staff of 10 providing care to 700 medium security inmates. Staff evaluations, department budgets for staff and supplies. Hold a daily sick call clinic and twice weekly physician clinics. Provide primary emergency care as needed. Monitor and provide routine care following standard orders for inmates with chronic disease. Phlebotomy and medication administration. Serve on the audit team to perform audits on other prison facilities including chart review for nursing and physician assessments.

July 1993 to March 1995- Staff nurse- Southeastern Regional Medical Center- Lumberton, NC. Provide assessments, medication, and other care to patients on the telemetry-cardiac step-down unit. Serve as shift charge nurse.

## Other Experience

In support of abaqis customers, provide assistance with identifying concerns and investigating root cause and corrective action for identified deficiencies.

Served as a new employee preceptor for 3 years with DHSR.

Basic life support instructor through the American Heart Association from 1993-2016.

# BALOGUN ADEWALE ABDULLATEEF

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## PROFILE SUMMARY

*I am a self-motivated, disciplined and selfless individual with diverse intellect and very sound professionally driven enthusiasm. I can optimally integrate within and provide operational support to varying teams voluntarily and at a short notice to ensure the highest standard of efficient and effective service delivery. As a surveyor, I have a proven track record of professionalism and efficiency to foster customer satisfaction. I am also a good team player with high numerical, good analytical and interpersonal skills. In addition, I am a resourceful person with the drive to achieve set standards and most importantly with the right attitude towards work. I offer problem resolution insight resulting in swift, effective and efficient service delivery. I can demonstrate accuracy and keeping in confidence all matters of the company and clients alike.*

## CORE COMPETENCE

•Purpose Driven •Result-oriented •Innovative •Team Player •Strategist •Forward thinking.

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## PROFESSIONAL EXPERIENCE

CertiSurv, LLC.	Health Facilities Compliance Inspector (Generalist)	Nov. 2020- Till Date
Colorado Department of Public Health and Environment	Health Facilities Compliance Inspector (Generalist)	Aug. 2015 – Nov. 2020

- ❖ Work independently or as a member of an interdisciplinary team to assess the care, treatment and quality of life provided by regulated health care facilities and programs through observations, interviews, and record review.
- ❖ On an unannounced basis, independently or as a member of an interdisciplinary team conduct inspections to ensure that the facility is operating in accordance with regulatory guidelines.
- ❖ Determines whether the entity is operating in compliance with Applicable statutes/regulations.
- ❖ Collects and documents evidence and survey results based upon observations, interviews and record review.
- ❖ Analyzes the evidence and survey results in order to determine whether and how the health care facility is out of compliance with applicable statutes and regulations.
- ❖ Uses judgment and experience in choosing specific regulations to be cited.
- ❖ Writes clear, concise, and legally defensible statements of deficiencies based on analysis of the documented findings and extensive knowledge of these laws, regulations and guidelines as set forth in the Centers for Medicare and Medicaid Services (CMS) and State regulations, Principles of Documentation, and program-specific protocols, policies and procedures, as applicable.
- ❖ Investigates complex complaint allegations, analyzes the data gathered during the investigation, determines whether the allegations of regulatory noncompliance are substantiated and, if substantiated, and determines the appropriate regulatory citations to be issued.
- ❖ Based upon analysis of data gathered, identifies non-compliance that constitutes immediate jeopardy to the health and safety of residents/patients and consults with program manager or supervisor for further instruction.
- ❖ Reviews and determines whether a plan of correction (POC) submitted by a non-compliant facility meets regulatory requirements.
- ❖ Acts as resource, educator, and interpreter of regulations for service providers and consumers, based upon established guidelines, policies and procedures
- ❖ Able to provide operational support to the Directors and the Administrators in the day-to-day running of the home in accordance with current Federal, State, and Local standards, guidelines, and regulations that govern the operation of nursing facility, and will be in cooperation with

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## **BALOGUN ADEWALE ABDULLATEEF**

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the Corporate Compliance Specialist and Director of Operations to maintain the highest degree of quality care at all times.

- ❖ Ability to encourage and educate all personnel assigned to ensure compliance with the company's written policies and procedures.
- ❖ Able to meet with my assigned facilities leadership teams, as well as support personnel, in planning the services, programs and activities for quality outcomes.
- ❖ Able to serve as a resource to facilities for assistance with surveys, compliance, Infection Control and QUAPI activities.
- ❖ Ability to mentor others to function at their full potential.
- ❖ Willingness to serve in a regulatory capacity.
- ❖ Ability to anticipate customer needs and take action to meet those needs; identify both internal and external customers, including stakeholders; continually search for ways to improve customer service and satisfaction.
- ❖ Excellent interpersonal skills and the ability to handle conflict and contentious or volatile situations.
- ❖ I am a trained team coordinator

### **Skabal Senior Care, Lagos – Nigeria**

#### ***Director of Rehab; March 2012 – July 2015***

- ❖ Managed a team of therapists and assistants (including Permanent and contract employees)
- ❖ Provided direct patient care (up to 50% of the day depending on location)
- ❖ Monitored the standard of clinical services delivered to ensure adherence to evidence-based care delivery standards and regulatory compliance
- ❖ Ensured the clinical management of the rehab department, including oversight related to case management, quality improvement, care planning, clinical utilization and patient identification
- ❖ Responsible for the hiring, orientation, development and support of all staff and contract employees
- ❖ Managed relationship with customer (location) team, provided reports and developed and implemented programs appropriate for the patient population
- ❖ As The Director of Rehab, I effectuated successful operations of my assigned location(s) - ensuring the highest standard of rehabilitation services was delivered in the most efficient manner while obtaining the best possible outcomes for our patients

### **General Hospital, Lagos – Nigeria**

#### ***Physical Therapist (National Youth Service Corps); March 2011 – February 2012***

- ❖ Optimize the functionality and skills of patients by providing, directing, and/or overseeing physical therapy
- ❖ Provided consultation and clinical supervision to PTAs.
- ❖ Directly supervised PTA and Rehab Tech in skilled tasks during group and individual treatment in a manner that promotes efficient and effective utilization of resources and facilitates the ongoing development of clinical skills in accordance with State Practice Acts, and the company's rehabilitation policy.
- ❖ Enhanced clinical expertise, professional and management skills through interaction with managers, therapists and other professional staff, self-study, and other continuing education activities.
- ❖ Maintained awareness of issues related to the profession of physical therapy and the health care environment.
- ❖ Understood various relevant payment models related to billing and treatment guidelines, as well as clinically appropriate means/modes of delivery. Provide quality care as well as reasonable goals and outcomes within the guidelines.
- ❖ Able to read, write, speak, and comprehend in English instructions, correspondence, charts, memos, and reports

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## **BALOGUN ADEWALE ABDULLATEEF**

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- ❖ As a physical therapist, I attained an advancement in my career through the company's continuing education platform thereby climbing the clinical ladder and utilizing the opportunity to serve with others who were working at the top of their discipline. I was also part a team of clinicians who provided continuing training, as well as systems and proven protocols to help ensure everyone is providing therapy in the most effective way for the patients and the most compliant way to help ensure our skilled nursing facilities partners were covered.

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### **EDUCATION AND OTHER CREDENTIALS**

**College of Medicine of the University of Lagos, Lagos State -B.Physical Therapy**

### **PROFESSIONAL ASSOCIATION AND TRAININGS**

Up to date completion log on Centers for Medicare and Medicaid Services (Mandatory trainings)

### **LICENSURE**

- ❖ Surveyor Minimum Qualification Test (SMQT)
- ❖ Medical Rehabilitation Therapists Board of Nigeria

### **GRANTS AND AWARDS**

- ❖ Best Research Graduating Student (College of Medicine, University of Lagos 2012)
- ❖ Three Time Winner of Best Intern Physiotherapist of the Month Award (General Hospital Lagos 2014)

### **VOLUNTEER LEADERSHIP**

- ❖ Anti-AIDS Club (College of Medicine, University of Lagos 2007 – Till date)

### **SKILLS**

- ❖ A good team player with high numerical, good analytical and interpersonal skills. Also, a resourceful person with drive to achieve set standards and most importantly with right attitude towards work.
  - ❖ Competent computer skills.
  - ❖ Enjoys good quality of life.

### **PROFESSIONAL REFERENCES**

Theo Frimpong- Nurse Consultant [REDACTED]  
Akinbode Fayokemi- Director of Regulatory Compliance Genesis Healthcare- [REDACTED]  
PT. Olukayode Nurudeen- Cardiopulmonary Specialist [REDACTED]

# ALETHA BIGHAM, RN, BSN, BSMT, CHFS III

## Career Profile

Works independently and with a team to perform mandatory CMS certification, licensure, and complaint surveys. Shares responsibility for team lead. Functions as a preceptor to surveyors in training.

## Education/Licenses/Certifications

Bachelor of Science, Nursing, University of Oklahoma, Oklahoma City, OK  
Registered Nurse, State of Oklahoma, 2005-Present

Bachelor of Science, Medical Technology, Freed-Hardeman College, Henderson, TN  
Certified, Medical Technologist, ASCP, 1986-Present

## Professional Experience

CERTISURV, LLC. January 2020 – Current  
Health Facilities Surveyor

OKLAHOMA STATE DEPARTMENT OF HEALTH October 2016 – December 2019  
Clinical Health Facility Surveyor III

OKLAHOMA FOUNDATION FOR DIGESTIVE RESEARCH, Oklahoma City, OK 2008 – 2016  
Nurse Clinical Research Coordinator

ST. ANTHONY HOSPITAL, Oklahoma City, OK 2005 – 2008  
Registered Nurse-Critical Care Unit

MEDICAL ARTS LABORATORY/DYNACARE LABORATORIES, OKC, OK 2001 – 2002  
Medical Technologist – Microbiology Specialty

VARIOUS COMPANIES, Oklahoma City, OK/Dayton, OH/Memphis, TN 1986 – 1991  
Medical Technologist- Generalist

## Community Service

Sexual Assault Nurse Examiner, 2008-2014

## Awards & Distinctions

OUCN RN to BSN Class of 2012 - Outstanding Graduating Student, Outstanding Professional Service Award, Outstanding Clinical Nursing Practice Award, Academic Achievement Award & Outstanding Student Leadership Award

Nurse of the Day, State of Oklahoma, State Capital - April 26, 2011, February 10, 2009 & March 30, 2006

## Publications

Bigham A. (Feb. 2010). ONA legislative priorities for 2010: Background and Sound Bites. Nurses ... The Solution! Nurses Day at the Capital. (Booklet). p.6.

Bigham A. (Sep. 2011). Could You Recognize a Modern Slave? The Oklahoma Nurse p.9.

Shakir FA, Ali T, Bigham A, et al. Determination of Serum Antibodies to C. difficile Toxin B in Patients with Inflammatory Bowel Disease. Gastroenterology and Hepatology. 2012 May; 8 (5):313-317.



# Amanda M. Smith RN

<b>Objective</b>	To obtain a position that will provide further experience and learning for personal and professional growth.	
<b>Education</b>	<b>Associate of Applied Science</b> August 2004 – May 2006 • Nursing <b>Licensed Practical Nurse</b> August 1996 – May 1997	<b>Southern Arkansas University</b>  <b>Texarkana College</b>
<b>Certification/Skills</b>	Surveyor Minimum Qualifications Test (SMQT) certified Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) certified Psychiatric Residential Treatment Facilities (PRTF) certified End Stage Renal Disease (ESRD) certified In depth knowledge of State and Federal Laws in Long Term Care, ICF/IID and PRTF Proven Administrative Leadership Investigative Training Extensive Research Techniques Excellent Communication Skills Self-Motivated, Hard Working, and Dependable Knowledge of Windows and Mac OSX Operating Systems Knowledge of Microsoft Office and Adobe Acrobat Pro	
<b>Work Experience</b>	<b>RN Manager</b> October 2020- Present	<b>State of Arkansas</b>
	<ul style="list-style-type: none"><li>• Direct review and enforcement processes: Provide oversight and guidance for two RN reviewers, two Health Facility Surveyor reviewers and a RN Supervisor who make up the Review and Enforcement section</li><li>• Provide guidance to field supervisors and survey staff in conducting investigations of facility noncompliance for nursing home, ICF/IID and PRTF certification and/or complaint surveys</li><li>• Provide interpretation of Federal regulations, protocols, and Principals of Documentation to survey staff and industry</li><li>• Process and present in Informal Dispute Resolution and Independent Informal Dispute Resolution hearings</li></ul>	
	<b>RN Supervisor</b> August 2019 – October 2020	<b>State of Arkansas</b>
	<ul style="list-style-type: none"><li>• Supervise two RN reviewers</li><li>• Conduct QA of citations prior to the Statement of Deficiencies being sent to nursing homes, ICF/IID and PRTFs</li><li>• Assist in Informal Dispute Resolution process</li></ul>	

**Health Facilities Inspector II****State of Nevada**

February 2018 – July 2019

- Investigate Complaints for SNFs, NFs, Hospitals, Psychiatric Hospitals and ICF/IIDs.
- Fundamental, Full and Extended Surveys for Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Standard, Initial and Follow-up Surveys for Nursing Homes and Dialysis providers

**Registered Nurse Coordinator/Supervisor****State of Arkansas**

June 2016 – February 2018

- Supervise surveyors in the ICF/IID Division
- Coordinate team activities and schedules
- Validation surveys for psychiatric residential treatment facilities
- Complaint surveys for psychiatric residential treatment facilities

**RN Surveyor****State of Arkansas**

February 2010 – June 2016

- Investigate Complaints
- Reviewer from June 2011 to June 2012
- Fundamental, Full and Extended Surveys for Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Standard, Initial and Follow-up Surveys

**RN – Critical Care****Arkansas Heart Hospital**

May 2009 – February 2010

- Patient Care
- Administer PO/IV medications
- Access/maintain IV lines
- Maintain/Discontinue arterial & venous sheaths
- Titrate vasoactive medications
- Care of the post surgical cardiac patient
- Inform patients and/or families with directives for at home care

**RN – Weekend Supervisor****Grace Healthcare of Benton**

May 2009 – February 2010

- Supervise all nursing department
- Review telephone orders for accuracy and documentation
- Oversee resident care
- Monitor/resolve resident or family complaints
- Ensure compliance of CMS

**Assistant Director of Nursing**

May 2009 – June 2009

**Chenal Heights  
Nursing & Rehab**

- Reviewed & filed Medical Records
- Supervised Nursing Staff
- Monitored/resolved resident or family complaints
- Ensure compliance of CMS

**RN – Staff**

October 2008 – May 2009

**Willis Knighton Hospital**

- Patient Care
- Administered PO/IV medications
- Accessed/maintained IV lines
- Maintained arterial/venous sheaths
- Titrated vasoactive medications

**Director of Nursing**

September 2007 – September 2008

**Summit Health & Rehab**

- Supervised all nursing department
- Hired all Nursing department
- Monitored/resolved resident or family complaints
- Ensured compliance of CMS

**Director of Nursing**

September 2006 – September 2007

**Homestead Manor  
Nursing Home**

- Supervised all nursing department
- Hired all Nursing department
- Monitored/resolved resident or family complaints
- Ensured compliance of CMS

**RN Staff**

June 2006 – September 2006

**Christus Schumpert Health**

- Patient Care
- Administered PO/IV medications
- Accessed/maintained IV access
- Maintained central venous access
- Provided care for the post-surgical patient

**LPN- LTC from 1997-2006**

**References**

Available upon request.

## Annette Furr Cash



### EDUCATIONAL BACKGROUND

- May 1990. Master of Science, Department of Home Economics, Nutrition Program, Western Carolina University, Cullowhee, North Carolina. (Degree obtained while working full time as a Public Health Nutritionist.)
- May 1982. Bachelor of Science in Public Health Nutrition. University of North Carolina at Chapel Hill.

### WORK EXPERIENCE

2019 – Present: Complaint Investigator (Part time/Contract) NC Department of Health & Human Services, Division of Health Services Regulation, Raleigh, NC.

- Conduct on-site surveys (complaint investigations) of nursing home facilities to determine compliance with state and federal requirements.
- Prepare written reports of survey findings.

February 2008 – June 2012: Facility Survey Consultant, NC Department of Health & Human Services, Division of Health Services Regulation, Raleigh, NC.

- Conduct on-site surveys of nursing home facilities to determine compliance with state and federal requirements.
- Prepare written reports of survey findings.

June 2004 – February 2008: Clinical Dietitian, NC Department of Correction, Scotland Correctional Institution, Laurinburg, NC.

- Provide nutritional assessment for inmates based upon available medical information (anthropometric, biochemical, clinical, and dietary).
- Counsel inmates on medical and nutritional needs dependent upon assessment.
- Provide inservice for staff regarding dietary and nutritional topics.
- Work with correctional staff to ensure inmates receive correct foods, including correct portions.
- Work with physicians and nurse practitioners to ensure inmates requiring therapeutic diets are served the correct diet as necessary.
- Work with Food Service Director to provide guidance to food service staff regarding sanitation and food preparation.
- Provide regional training for food service staff on topics such as HACCP and food preparation, nutritional needs, therapeutic diets and other relevant topics.

July 2003 – May 2004: Clinical Dietitian, Southeastern Regional Medical Center, Lumberton, NC.

- Provide direct care to hospitalized patients.
- Completed dietary assessments for patients based upon available anthropometric, biochemical, clinical and dietary data.
- Provide nutrition education for patients, based upon findings of dietary assessment.
- Complete test trays from the kitchen to ensure food served is appropriately prepared, meets the requirements for any special or therapeutic diet, is tasty, and is the correct temperature when served.

December 1997 – June 2003: Regional Public Health Nutrition Consultant, NC Department of Health & Human Services, Raleigh, NC.

- Provide technical assistance and guidance to agencies (Health Departments and Health Centers) covering 15 counties, who are directly responsible for provision of nutrition services. This involves working with Health/Agency Directors, Nursing Directors, Nutritionists/Dietitians, Administrative staff and others, including clients. In addition to providing technical assistance to these individuals, must also ensure that the agency follows program policies and federal/state regulations.
- Deliver guidance and direction for agencies regarding provision of nutrition services and growth of nutrition programs. Work with agencies to develop and implement plans for program growth and improvement of services.
- Conduct bi-annual reviews of all agencies, including clinical and administrative auditing.
- Develop and conduct presentations on a variety of topics of current relevance, based upon need of clients. Presentation methods include on-site group training, regional and statewide trainings, and statewide video teleconferences. Train staff to provide excellent customer service to clients.
- Initiate problem solving techniques and strategies with agencies to enhance program output. Implement goals and objectives to improve quality of service.
- Major accomplishments in this position:
  - Served on a committee responsible for implementation of changes to statewide program. This involved development of guidance and manual, training via teleconference, and on-site assistance.
  - Revised and updated manual for a unique computer program utilized by agency staff.

January 1994 - November 1997: Nutrition Program Director, Wayne County Health Department, Goldsboro, North Carolina.

- Supervised and managed Nutrition Services for Wayne County, including WIC Program and Medical Nutrition Therapy for High Risk Patients.
- Supervised 15 staff members (Nutritionists, Processing Assistants and Licensed Practical Nurse).
- Served on management team.
- Served on various local, regional, and state organizations and committees.

July 1991 – December 1993: Nutritionist II, Haywood County Health Department, Waynesville, North Carolina.

- Provided comprehensive nutrition counseling for clients based upon assessment of nutritional status.
- Coordinated WIC services with other health department clinics/services.
- Formulated and executed food prescriptions for clients based on individual nutritional/medical status and needs.
- Documented assessment and counseling in client's medical records.

January 1986 – June 1991: Nutritionist II/Assistant WIC Director, Madison County Health Department, Marshall, North Carolina.

- Responsible for administration of the WIC Program.
- Determined medical/nutritional eligibility for the WIC Program.
- Coordinated WIC Program benefits for participants, vendors, and health department staff.
- Technical administration of the Madison County WIC Program including assisting with the computerization of participant files.

June 1982 – September 1985: Nutritionist II, Stanly County Health Department, Albemarle, North Carolina.

- Responsible for administration of the WIC Program.
- Determined medical/nutritional eligibility for WIC Program benefits.
- Provided nutritional counseling specific to WIC client's nutritional needs.

#### SKILLS

- Computer Related: Microsoft Word, Microsoft Excel, Microsoft PowerPoint, Microsoft Outlook, Netscape Communicator, Netscape Messenger, Netscape Calendar and other software programs.
- Ability to provide individual and group education utilizing PowerPoint, Overheads, InFocus and other equipment.
- Ability to work with a variety of individuals, developing rapport in order to meet their needs as well as being able to elicit necessary changes.
- Determination to provide excellent service and guidance to all clients.
- Ability to be flexible and adapt to changing needs and requirements of the job.

#### REFERENCES

Available upon request

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# APRIL MUNN

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## P. OFESSIONAL SUMMARY

Rigorous and professional surveyor with extensive knowledge of recertification, complaint, follow-up, infection control, life safety and extended surveys. Vast understanding of federal and state regulations and standards. Proven experience in regulatory compliance, investigation, quality assurance with sound judgement, analytical problem-solving skills and decisive nature.

## SKILLS

- Regulatory and statutory compliance
- Quality Assurance
- Health and safety standards
- Investigation/inspection
- Administration

## WORK HISTORY

**Health Facility Surveyor and Life Safety Surveyor, 04/2018 to Current**

**Department of Human Services-State of Arkansas – Little Rock, AR**

- Responsible for conducting on-site survey and certification of Medicare-Medicaid certified health care facilities using federal and state regulations and standards
- Surveys facilities to verify regulatory compliance with Medicare certification standards and to protect the health, welfare and safety of residents and/or patients based on State and CMS regulations
- Determines if care, treatment, and services are consistent with federal requirements
- Evaluates all aspects of the long-term care facility from the quality of care to resident rights and physical environment
- Conducts complaint investigations based on State protocols and CMS federal regulations
- Communicates non-compliance issues with the key personnel throughout the survey and during the exit conference to assure understanding of the deficiencies cited
- Conducts follow-up visits and monitoring surveys to ascertain if the facilities' plans of correction to resolve the deficient practices have been implemented
- Reviews previous survey data and prepares packets of forms to be completed in a survey following principles for documentation, and reviews documents for compliance with Federal regulations
- Prepares accurate reports of all matters relating to surveys for federal certification so that a determination can be made regarding certification from observations, record reviews and interview
- Compiles weekly reports and provides reports of compliance or non-compliance
- Conducts annual and follow-up surveys for the life safety code regulations for long term care facilities

**Site Director, 08/2017 to 03/2018**

**T. C. Vaughan Senior Adult Center – Morrilton, AR**

- Responsible for the overall operation of the Senior Center activities, including supervising the Center's programs, staff, volunteers and facilities

- Coordinates the organization, staffing and operational activities for the Senior Center
- Direct, coordinate, and review the daily work plans for the Senior Center services and activities; assign work activities; monitor work flow; review and evaluate methods and procedures; meet with staff to identify and resolve problems
- Identifies opportunities for improving service delivery methods and procedures; identify resource needs; review with appropriate management staff; implement necessary improvements
- Responsible for implementing program polices in accordance with the Division of Aging, including monitoring and evaluating services, documentation, quality control
- Gathers data, analyzes it and prepares and compiles it into reports which are distributed to the appropriate personnel
- Ensures excellent recordkeeping and maintenance through Harmony software for billing to the governing agencies
- Performs diverse human resource activities, including hiring, training, disciplinary and termination in compliance with organizational and legal guidelines.
- Provides exceptional service including case management, planning activities, and educational opportunities to a large client base
- Recruits new members through attendance at community events, promotional materials, and other methods
- Provides administrative duties including timekeeping and other monthly reporting

**Executive Director, 08/2013 to 08/2017**

**Perry County Day Service Center, Inc. (PCDSC) – Perryville, AR**

- Oversees and provides the overall leadership and vision of PCDSC, which is a Developmental Day Treatment Center (DDTCS) for adults with developmental/intellectual disabilities licensed by the State of Arkansas
- Responsible for the administration of PCDSC, including: meeting compliance mandates, conforming to all regulatory matters for Center-based services from the State of Arkansas constituting program policy and procedure interpretation and implementation, quality metrics, evaluating program service delivery effectiveness, case management and effective documentation
- Additionally, responsible for all human resource and administrative duties including interviewing, hiring, training and evaluating employee performance, collecting and maintaining employee files, designing and implementing administrative and operating procedures, timekeeping, payroll management and other monthly reporting, ensuring fiduciary duties for budget control, processing and tracking total revenue, advising the Board of Directors on all matters and making referrals to other agencies
- Responsible for overseeing and ensuring all regulatory requirements are met for the Child and Adult Care Food Program (CACFP) as well as submitting monthly reports and completing the annual application for participation
- Additionally, responsible for meeting transportation compliance and regulatory requirements for the FTA Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities Program including submitting quarterly data and other required reports and applications
- Accountable for ensuring the health and safety of all consumers by following applicable federal and state requirements



## EDUCATION

**Bachelor of Arts:** Occupational Safety, 2016

**Waldorf University** - Forest City, IA

Occupational Safety

- Summa cum laude graduate

**Bachelor of Arts:** Rehabilitation Science , 2013

**Arkansas Tech University** - Russellville, AR

Primary Emphasis-Social Services

- Magna cum laude graduate

**Associate of Science:** 2012

**University of Arkansas Community College** - Morrilton, AR

## CERTIFICATIONS

SMQT

Certified Fire Inspector 1-CFI 1

OSHA 30

## REFERENCES

Heather McQuade-Former Health Facilities Surveyor for State of Arkansas/ Assisted Living Administrator-

██████████

Brenda Leach-Former Executive Director-T.C. Vaughan Senior Center-

██████████

Gloria Rutherford-Former Vice President of Perry County Day Service Center, Inc. (PCDSC)

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Melanie Bradford-Registered Nurse Surveyor-State of Arkansas-

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John Tipton-Pharmacist

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Naaman Judy-Teacher-Perryville School District-5

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# Ashley Wilson

**Objective:** It is my goal to work in a contract position as a health facilities surveyor.

**Qualifications:** In every position as a Nursing Home Administrator, responsibilities included (but were not limited to) the oversight of a variety of departments, budgeting, human resources/payroll functions, and marketing.

## **Employment History and Achievements:**

**Maplewood Nursing & Rehabilitation Center-** Philadelphia, PA [180 bed skilled nursing facility]  
Administrator 9/19- 4/20

- Completed annual inspection with over 50% reduction in citations from previous year
- Developed and implemented Compliance and QAPI program
- Instituted fall, wound and weight tracking meetings

**Laurel Brook Rehabilitation & Healthcare-** Mount Laurel, NJ [220 bed skilled nursing facility]  
Administrator 10/18-5/19

- Increased census from 110 to 150 over four month period
- Stabilized staffing
- Worked with physicians to implement nephrology and cardiology programming
- Reduced falls and wound development by over 50% month over month

**Warren Barr North Shore-** Highland Park, IL [160 bed skilled nursing facility]  
Administrator 1/17- 7/18  
Executive Director 7/16-12/16

- Maintained average census of 145 with 50 Medicare/Insurance, with highest being above 70
- Reduced number of tags during annual survey from 13 to 5
- Successful Joint Commission Accreditation survey
- Decreased employee injuries- going on five months without an injury
- Eliminated use of chair alarms as fall prevention
- Instituted process for completion of admissions contracts for new admissions- going from 0% to 95% completion

**Colorado Department of Public Health & Environment-** Denver, CO  
Nursing Home Compliance Inspector 1/16-7/16

- Assessed and evaluated health care facilities quality of care, services, and treatment of residents as well as facility practices through observations, record review, and interviews
- Identified areas of non-compliance with federal and state regulations

**Legacy Psychiatry Group-** Denver, CO  
Business Development Liaison 8/15-12/15 [short term contract position]

- Established the Colorado region of a national psychiatry group
- Business to business marketing to skilled nursing facilities in the Denver area

- Worked with facilities and physicians to obtain contracts and start services
- Inserviced/educated facilities/physicians on physiatry program

### **Alden HealthCare & Rehabilitation**

Administrator- Alden Meadow Park- Clinton, WI 3/15-7/15 [72 bed skilled nursing facility]

Administrator- Alden Debes- Rockford, IL 7/13- 2/15 [200 bed skilled nursing facility]

Assistant Administrator- Alden Debes- 2/12-7/13

Administrator- Alden at Fort HealthCare Sub-Acute- Fort Atkinson, WI 8/11-2/12 [28 bed skilled nursing facility]

- Completed OSHA survey with two minor recommendations
- Increased customer satisfaction scores from an average of 7 to 9 on a 10 point scale
- Ensured MDS accuracy through CMI process- increased Public Aid daily rate from \$126 to \$136 per patient

### **Bethany Riverside- La Crosse, WI**

Administrative Intern 8/10- 8/11

- Internship completed as part of degree
  - Worked in every department of facility
  - Executed 'Lean Improvement' project as leader of the 'Lean Team'. Presented on the topic at the Wisconsin Association of Homes and Services for the Aging Spring Conference 2011
  - Spent 24 hours as 'resident for a day'

### **Schmitt Woodland Hills Retirement Community- Richland Center, WI**

Activity Aide & Receptionist 4/05-5/07

### **Education:**

University of Wisconsin- Eau Claire, Wisconsin

Bachelor's of Science in Health Care Administration

August 2011- *Cum Laude* distinction

3.40 GPA

### **References:**

Available upon request

## Aubrey Marie Cruz Heim



### **Objective**

To provide and promote the delivery of safe, quality patient care with high emphasis on customer service and professional nursing.

### **Education**

University of Texas – Austin, TX  
Bachelor of Science in Nursing  
Date of graduation: December 2009

### **Work**

#### **Experience**

#### **Texas Health and Human Services**

Austin Assistant Regional Director  
July 2020 – present

Nurse Surveyor  
September 2015 – July 2020

#### **Travel Registered Nurse**

Alegent Creighton Health – Omaha, NE  
General Med-Surg Unit – November 2013 – July 2014

Christus Saint Vincent Regional Medical Center – Santa Fe, NM  
Oncology Med-Surg Unit – July 2013 – October 2013

North Memorial Hospital – Colorado Springs, CO  
Ortho/Med-Surg Unit – March 2013 – June 2013

#### **John Peter Smith Hospital**

Registered Nurse II at a Teaching and Learning Hospital  
Tower 7 – Oncology Med-Surg Unit  
March 2010 – March 2013

#### **Austin State Hospital**

Psychiatric Nursing Assistant  
May 2008 – June 2009

# REBECCA 'BEC' HEATH

I enjoy serving our community and traveling. Assisting facilities to better serve our elders is fulfilling and there is never a dull moment. Traveling for work is exciting and enlightening.

## EXPERIENCE

**JULY 2019 – PRESENT**

**HEALTH COMPLIANCE INSPECTOR SNF/NF,** COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

As a Health Compliance Inspector of CDPHE my duties included:

- Assuring the CMS contractual obligations of nursing facilities in Colorado are being followed according to the State Operations Manual through observations, record review, and interviews.
- Investigating allegations of abuse, neglect, and mistreatment of residents with nursing homes and rehabilitation programs, as well as environmental hazards, sanitation, standards of care, and standards of living.
- Observing the conditions and treatment of residents within nursing care facilities.
- Reviewing resident charts, employee records, and hospital records to find facts, information, and events.
- Interviewing residents and staff about complicated topics such as alleged abuse, neglect, issues with care, staffing, sanitary living conditions, and resident rights.
- Interactions with members of the administration, floor staff, auxiliary staff, and vendors of nursing facilities to gather information in a courteous manner.
- Using technical AP style writing to communicate findings clearly and timely for review and publication.
- SMQT certification achieved May 2021

**APRIL 2015 – JULY 2019**

**MENTAL HEALTH CLINICIAN,** COLORADO MENTAL HEALTH INSTITUTE AT FORT LOGAN

Supervise patients for safety, leading recovery based groups, daily charting of patient activities, maintaining professional boundaries with patients while encouraging appropriate social behavior and treatment participation.

**MARCH 2017-AUGUST 2018**

**BEHAVIORAL HEALTH TECHNICIAN,** DENVER HEALTH HOSPITAL AUTHORITY

As a behavioral health technician (BHT) at Denver Health I had the pleasure of working in the Psychiatric Emergency Department, Adolescent and Adult Psychiatric units, Denver CARES (publically funded detoxification center) and the Downtown Denver City Jail. All of these roles include respectful patient and coworker interactions, safety checks of living environments, teamwork in emergency situations, ADL's, blood draws, wound care, working with difficult populations and adaptation to quickly changing environments. I accepted a full time position at Denver CARES in January 2018 and the additional job

duties of this facility include interacting with difficult individuals under the influence of drugs and alcohol, intake process, driving and dropping of clients, laundry and meal supervision, milieu management and health monitoring.

OCTOBER 2013 – APRIL 2015

**HEALTH CARE TECHNICIAN II-THERAPY ASSISTANT, WHEATRIDGE REGIONAL CENTER**

As a Therapy Assistant it was my privilege to maintain a smooth curriculum of arts and crafts, community engagement, and resident empowerment. As a Therapy Assistant I tracked the progress or decline of work related goals and programs for my designated residents. This position also involved administering medications, daily care activities, and encouraging the independence of residents.

AUGUST 2006-MAY 2010

BACHELOR OF SCIENCE IN PSYCHOLOGY, COLORADO STATE UNIVERSITY AT PUEBLO

DECEMBER 2013- CERTIFIED NURSE AIDE CERTIFICATION (NA.00759552)

MAY 2014- LICENSED PSYCHIATRIC TECHNICIAN CERTIFICATION (DD.02035642)

MAY 2021- SUREVYOR MINIMUM QUALIFICATIONS TEST PASSED AND CERTIFICATION EARNED

## SKILLS

- Fast learner and transcriber
- Detail and deadline oriented
- Fluent with Google and Windows software
- Self teacher, learner and educator
- Flexible and easy going
- Personable

## **Becky Richardson**



### **EXPERIENCE**

#### **Nurse | Atlanta Survey and Enforcement Division-Centers for Medicare and Medicaid, September 2010-December 2021**

- Conducted mandated Federal Monitoring Surveys for health care facilities by providing clinical review and evaluation of survey and certification activities involved with the delivery of health care service for Medicare/Medicaid recipients.
- Monitored and evaluated State agency's performance and enforcement of Medicare/Medicaid standards and applicable regulations.
- Served as State Coordinator for the state of Georgia and Kentucky. Monitored and analyzed the states performance through evaluation reports, survey activity. Scheduled quarterly and individual meetings/conferences with the state agency to discuss trends and areas requiring improvement. Coordinated and provided training for state agencies to management and surveyors as requested.
- Served as team leader for onsite surveys, served as lead spokesperson during survey and exit conference, coordinated survey report findings and recommendations to CMS management.
- Provided oversight and guidance for federal oversight surveys using applicable regulations. Prepared and presented reports of completed findings to state agency managers.
- Served as lead for State Performance Standards Review, coordinated assignment and tracking and completion of reviews.

#### **Nurse Surveyor; State of Georgia Dept. of Community Health/HFRD, Atlanta Ga, March 1999—September 2010**

- Conducted annual state and federal surveys for licensure and recertification, conducted complaint and follow up surveys to ensure compliance of federal and state regulations.
- Assisted Regional Director with QA of survey findings, prepared and submitted 2567 for enforcement, assumed responsibilities in the absence of the Regional Director.
- Served as Interim Regional Director for Southern Region of Personal Care Division.

#### **Patient Account Representative; Medaphis Corporation, Lawrenceville, Ga, September 1997-March 1999**

- Served as account representative for medical practices.
- Duties included communicating with clients to answer questions regarding accounts, verified and filed insurance information as needed.
- Served as contact person for insurance company and client.

**Admissions Assessment Nurse; Northeast Georgia Hospital, Gainesville, Ga, June 1992-September 1997**

- Conducted pre-operative assessments and evaluated patients prior to scheduled surgical procedures.
- Completed a comprehensive medical history, physical examination, implemented pre and post op physician orders and provided specific patient education prior to surgical procedures.

**Home Health Nurse; Kimberley Quality Care, Cumming, Ga, November 1991-June 1992**

- Provided all aspects of nursing care for patients in their home.
- Worked on a PRN basis between the Gainesville and Cumming offices.

**Office Nurse; Joseph J. Miller M.D. The Emory Clinic (I.N. Turk III, M.D. Retired), Atlanta, Ga, March 1985-May 1991. Cardio-Thoracic Surgery Practice.**

- Performed chest x-rays, assessed patient pacemaker status pre and post op.
- Provided patient management of various cardiothoracic problems.
- Assisted with front office duties, scheduled office appointments, responsible for coordinating surgical schedule with main operating room and obtained pre-certification for surgical procedures.

**Staff Nurse; Emory University Hospital, Center for Rehabilitation Medicine, Atlanta, Ga, May 1983-March 1985**

- Performed nursing care of patients requiring intensive rehabilitation services for disorders such as cardiovascular accidents, Guillian-Barre Syndrome, closed head injuries and spinal cord injuries.
- Provided extensive training and emotional support to patients and families on goals and expectations of rehabilitation.

**Staff Nurse; St. Joseph's Infirmary, Atlanta, Ga, December 1982-May 1983**

- Provided nursing care of patients with cardiac problems, pre-operative and post-operative cardiac catheterization and post-myocardial infarction

**Staff Nurse; Dekalb General Hospital, Decatur, Ga, March 1982-December 1982**

- Provided nursing care for patients with various medical and neurological disorders.

**Education:**

Nursing Diploma- Grady Memorial Hospital School of Nursing-Atlanta, Ga May 1982

**Certifications:**

- Surveyor Minimum Qualification Test (SMQT)
- Quality Indicator Survey (QIS)



Betsy Strader RD

**CAREER SUMMARY:** Dedicated Registered Dietitian with 20+ years of experience providing quality, patient centered care. Diversely experienced in state/federal regulatory enforcement, clinical nutrition, education, leadership, and quality assurance.

**EDUCATION:**

California Polytechnic State University, San Luis Obispo, Ca. March 1993, B.S. - Nutritional Science

**PROFESSIONAL EXPERIENCE:**

**August 2017 to present Health Surveyor**

Ascellon Corporation  
Landover, MD

Served as team member and team leader on various types of surveys (re-certification, infection control for Covid-19, comparative, complaint investigations, and revisits) for long term care and non-long term care surveys, which included Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID), ALF's (Assisted Living Facilities) and Hospitals. Traveled to healthcare facilities nationally conducting surveys to assess compliance with requirements and regulations guiding the quality of care for residents/customers of the facilities. Applied approved survey protocols for conducting on-site surveys. Specific activities included off-site preparation, tour of facility, observation of care, record review, interviews of staff and families, to determine if care, treatment, and services are consistent with Federal requirements. Conducted follow-up visits and monitoring surveys to ascertain if facilities' plans of correction to resolve the deficient practice had been implemented. Evaluated many aspects of the healthcare facility system from the quality of care to the consumers' rights and physical plant. Communicated the non-compliance issues with key personnel throughout the site review and during the exit conference to assure an understanding of the deficiencies cited. Determined if a plan of correction is acceptable. Participated in training, assisted with facility and bureau training. Participated in work groups as needed.

**April 2015 to August 2017 Nutrition Health Coach**

Natural Grocers by Vitamin Cottage,  
St. George Utah

The NHC position is a dual multi-faceted position, which emphasizes customer/employee education, sales, promotion, community relationship building and retail operations. As the store's nutrition ambassador, the fundamental responsibility of the NHC is to provide science-based education to drive store sales and empower customers to make healthy choices. As the NHC I was responsible to build relationships with community partners by spreading awareness of Natural Grocer's store services. This would include establishing relationships with practitioners who recommend supplements and coaching services to their clients. I was the liaison between the customer and the department heads making recommendations for inventory and special orders. As the NHC I was involved in store and product promotions within the store and out in the community. I was required to maintain 164 hours of CEU's each year in organic foods, health, and beauty with the intention of educating customers and staff.

**April 2014 to Sept 2014 Clinical Dietitian**

Meridian Healthcare Torrey Pines,  
Las Vegas Acute Rehab  
Las Vegas, Nevada

Worked with the interdisciplinary team to monitor weights, labs, and skin integrity to determine nutritional care from ages three months to seniors. Maintained current medical charts and records with nutritional updates. Provided specialized instruction to dietary staff for therapeutic diet and food safety compliance. Assessed, developed implemented and evaluated nutritional care plans and provided for follow-up, including written reports in a timely manner and accordance to state guidelines.

**November 2013 to April 2015 Independent Consultant**

Crandall Corporate Dietitians,  
St. George, Utah

Evaluated and monitored all aspects of the food service operation, including food safety inspection of all food preparation and storage areas. Planned, organized, and conducted in-service educational programs for food service personnel. Developed, analyzed, and provided cycle menu for diets included in the hospital standardized diets. Provided specialized instruction to dietary staff for

therapeutic diets that are not part hospital standardized diet plan. Assessed, developed, implemented, and evaluated nutritional-care plans and provided for follow-up, including written reports in a timely manner and accordance to state guidelines. Consulted with the health care team concerning any deficient practice.

**June 2011 to June 2013 Director of Dietary Services**

St. Joseph Villa,  
Salt Lake City, Utah

Director of Food Services and Clinical Dietitian for continuum of care for long term skilled, assisted living and full-service apartments. Responsibilities included scheduling and staff development of 36 employees. Developed and analyzed a 5-week rotating clinical geriatric menu. Worked with the interdisciplinary team to monitor weights, labs, and skin integrity to determine a personal care plan. I directed and monitored daily meal preparation for 200 individuals in six separate dining areas. Responsible for inventory control and sanitation of the kitchen and dining areas. I maintained all current state and county licensing.

**January 2011 to June 2011 Health Program Surveyor**

State of Utah Dept. of Health,  
SLC, Utah

I tracked facility practice and procedure to determine federal and state Medicaid/Medicare compliance. Responsibilities included using analytical skills, clinical skills, and professional evaluations to determine areas of non-compliance. I researched clinical/procedural records to identify, extract and document evidence of compliance or non-compliance in Medicare/Medicaid certified medical facilities. I conducted interviews with residence and family members to determine quality of care and identify any operational issues or problems. As a surveyor I performed observations with members of an inter-disciplinary team of various LTC, ICF/IID and acute care facilities to monitor medical, physical, environmental, and nutritional compliance. I then documented all survey findings in accordance with the principles of documentation.

**December 2005 to December 2010 Clinical Dietitian**

Utah State Developmental Center,  
Department of Human Services, American Fork, Utah

Directly responsible for the unique food service and nutritional care of 225 developmentally disabled individuals. I identified and recommended modified diets which met individual medical, physical, and emotional needs of mentally challenged adolescents and adults. Responsible for monitoring HACCP guidelines for 47 cooking apts. Developed and analyzed 25 weeks of menus which met state and federal requirements for RDA's. Developed training material, trained staff to implement the dietary recommendations. Worked with the interdisciplinary team to monitor labs and weights and developed personalized plans for the best possible outcome and quality care. Monitored the warehouse supplement inventory to comply with a strict budget. Worked closely with the financial dept. to monitor the food budget. Met deadlines as they relate to assignments and job task. Maintained current medical charts and records on an echart system.

**October 2000 to December 2005 Health Program Surveyor**

State of Utah Dept. of Health,  
SLC, Utah

I tracked facility practice and procedure to determine federal and state Medicaid/Medicare compliance. Responsibilities included using analytical skills, clinical skills, and professional evaluations to determine areas of non-compliance. I researched clinical/procedural records to identify, extract and document evidence of compliance or non-compliance in Medicare/Medicaid certified medical facilities. I conducted interviews with residence and family members to determine quality of care and identify any operational issues or problems. As a surveyor I performed observations with members of an inter-disciplinary team of various LTC, ICFMR and acute care facilities to monitor medical, physical, environmental, and nutritional compliance. I then documented all survey findings in accordance with the principles of documentation.

**August 1999 to October 2000 Director of Food and Nutrition**

HealthSouth Rehabilitation Hospital  
Sandy, Utah

Directed the entire dietary department for an 85-bed facility. Responsibilities include policy and procedure development and enforcement, budget and inventory control, recipe and menu development for the patients and public cafeteria. Directed and monitored daily food preparation. I interviewed, hired, and trained new employees. I conducted monthly in-services and staff meetings. I educated staff in therapeutic diets and recipes. I educated patients in doctor's diet orders. Maintained state and federal sanitation regulations in kitchen and cafeteria.

**May 1997 to May 1999 Assistant Director of Food Services**

ARAMARK, Marian Medical Center,  
Santa Maria, CA

Responsibilities included budget control for \$1.7 million contract, supervision of 32 employees, 3 managers, and 2 diet techs as well as monitoring of department's FTE's. I developed recipes and menus for a five-week cycle for the cafeteria and a 7-day therapeutic menu for the patients. I directed and monitored daily kitchen sanitation and meal preparation, which included theme buffets and parties for up to 1,000 people. I conducted monthly in service and staff meetings. I interviewed, hired, and trained new employees. I directed clinical activities in the acute, extended and residence facilities. Taught community education classes for schools, churches, and other non-profit organizations. I was involved in many fund-raisers for the MMC foundation, American Heart Association, Boys and Girls Club and several community health fairs.

**July 1995 to May 2013 Independent Contractor, Quality Assurance**

R.Q.A. Inc  
Salt Lake City, Utah

Performed product retrievals, retail quality audits, product recalls and consumer complaint retrievals. As a quality assurance contractor, I was hired to evaluate products using criteria from each company that provided the contract. I was required to report reliable data within a certain time frame. My audits and recalls included package condition, product assessment, age distribution, display, and availability of several products at locations throughout the city. I checked shelf life, manufacturing performance, advertising claims and labeling compliance. Some of my contracts included companies such as Coca-Cola, Jiffy Peanut Butter, Mars, Gerber Baby Food, Ocean Spray, and Foster Farms. Pedigree Dog Food and many others.

**September 1993 to May 1997 Food Production Manager**

ARAMARK, Marian Medical Center  
Santa Maria, Ca.

Responsibilities included inventory control, purchasing and budget implementation for \$1.7 million contract. Supervised and scheduled 32 employees. Developed recipes and menus for five-week cafeteria cycle. Supervised daily meal production for the cafeteria, patients, and catering functions. Planned and coordinated all employees and off-site functions for up to 1,000 people. Conducted monthly in-service meetings for all production staff. Created and monitored strict sanitation and food safety procedures in all production and storage areas. Followed all requirements for title 22 and JCAHO.

**Computer Experience:** Microsoft Word, Microsoft Teams, Microsoft Excel, Share-Point, Therap 2021, Matrix Care, Medical Health Tech, Aspen, Point Click Care, American Health Technology and Collain Health Systems

**APPLICABLE CONTINUING EDUCATION:**

Foundational Investigational Skills (Department of Health and Human Services) 10/3/19  
LTC (Long Term Care) Survey Process (Department of Health and Human Services) 10/14/19  
Basic Writing Skills for Survey Staff (Department of Health and Human Services) 10/3/19  
Foundational Investigative Skills (Department of Health and Human Services) 5/5/18

- Effective Observations Using the Five Senses 5/5/18
- Surveyor Boundaries: To Do or Not to DO 5/5/18
- The Surveyor in Court: Writing Defensible Citations 5/5/18
- Depositions and Hearing Testimony 5/5/18

Investigative Techniques (Department of Health and Human Services) 5/5/18

**PROFESSIONAL CERTIFICATIONS AND LICENCES:**

Commission on Dietetic Registration: ID number 867855  
Survey Measure Quality Test (SMQT)  
Federal and State Certified Surveyor/Consultant  
Quality Inspection Survey (QIS)

# Elizabeth Ann Tebo, RN

## Summary:

I have been a Director of Nursing since 1995 and a regulatory surveyor for the State of Texas for the past 2 years. I would like the opportunity to assist nursing facilities obtaining and maintaining compliance with State and federal regulations and improving overall care delivered to the elderly population.

## Skills:

- SMQT certified.
- CPR certified.
- ACLS certified.
- Skillful in Word, Aspen, ASEQ, Tulip and other state and federal computer programs.

## Education:

High School Diploma June 1978  
Graduated with honors  
Salem Senior High School, Salem, Ohio

Registered Nurse Diploma December 1989  
Graduated with honors from the Akron City (label!e Firestone' s School of Nursing in Akron Ohio.  
Recipient of the Deaconess Scholarship for 2 years for leadership skills.  
Member of Phi Lambda Sigma at Akron University.

## Work Experience:

### Regulatory Surveyor, State of Texas

December 2016 - 2019

- Inspect SNF, NF, ALF and Adult Day care centers to ensure compliance with federal and state regulations.
- Investigate allegations, complaints and Facility reported incidents in nursing homes.

### Staff RN - Pestigious Nursing

April 2015 - December 2016

- Provided care in various areas of need as an agency nurse.

### Director of Nursing

1995 - 2020

- Worked in various facilities as Director of Nursing, starting at the Portage County Nursing Home in Ravenna Ohio in 1995.
- Worked with United Rubber Workers Union while in Ohio.
- Developed Policy and Procedures, developed systems for monitoring of multiple care areas including psychotropic medications, diabetic care, physician orders, complaints, wounds, incidents etc.
- Able to keep a Medicare census of greater than 20% in most facilities.
- Able to assess and cut costs in various areas.

# CARLA ROBERTS, RN, LNHA



To join a team that is compassionate and their mission is to improve the quality of life of the others.

## SKILLS

- Deep knowledge of ALL aspects of LTC
- Knowledge of Long Term Care Survey Process
- Decision making and problem solving
- Maintain composure in stressful situations
- Personable, Team Player
- Effective communicator
- Critical thinking and application
- Self-Starter
- SMQT Certified

## EXPERIENCE

APRIL 2021 – CURRENT

**LICENSED NURSING HOME ADMINISTRATOR**, HIGHLAND COURT (SOUTHERN ADMINISTRATIVE SERVICES)

Responsible for all daily clinical and operational aspects of a 78 licensed bed skilled nursing facility.

FEBRUARY 2020 – APRIL 2021

**RN SURVEYOR**, AR DEPT HUMAN SERVICES, OLTC, STATEWIDE

Apply knowledge of CMS Regulations and critical thinking skills to determine regulatory compliance within Arkansas' nursing homes through annual certification surveys and complaint investigations; summarize findings of non-compliance and areas of concerns for further review

OCTOBER 2005 – JULY 2019

**LICENSED NURSING HOME ADMINISTRATOR**, OZARK HEALTH, INC, CLINTON AR

Served in the role of LNHA from 2015-2019 where I was responsible for all daily clinical and operational aspects of a 118 licensed bed skilled nursing facility and oversight of approximately 125 employees. Years of service prior were held as:

- Case Manager September 2014 to February 2015  
Assisted providers in performing wellness visits to Medicare recipients
- Nurse Liaison January 2013 to September 2014  
Screened patients for appropriate level of care following hospitalization or acute illness
- Medicare/Rehab Manager January 2010 to January 2013

Screened referrals and assisted residents and families with placement into the facility

- Home Health Manager October 2005 to August 2008  
Oversee daily operations of home health care including 130 patients

**AUGUST 1999 - OCTOBER 2005**

**EXIT NURSE/HEALTH EDUCATOR**, BOSTON MOUNTAIN RURAL HEALTH CTR,  
CLINTON, AR

Provided health education to patients newly diagnosed with a chronic illness or those needing additional education on disease processes. Taught CPR classes to providers, community and staff.

## **EDUCATION / LICENSURE / CERTIFICATIONS**

**DECEMBER 2001**

**ASSOCIATE DEGREE, NURSING**, NORTH AR COLLEGE, HARRISON AR

**SEPTEMBER 2015**

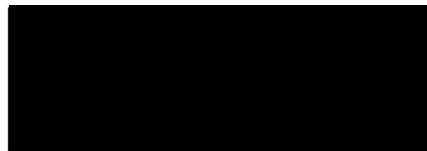
**LICENSED NURSING HOME ADMINISTRATOR**, AR DEPT OF HUMAN SVCS

**AUGUST 2020**

**SURVEYOR MINIMUM QUALIFICATIONS TEST CERTIFIED**, DHHS, CMS

## **REFERENCES**

Melissa Slaughter, RN Certisurv  
Daphne Brown, RN, Ozark Health, Inc.  
Lisa Swofford, Ozark Health, Inc.



# CARRIE BURNEY

[REDACTED]

[REDACTED]

[REDACTED]

## Summary

Dedicated Register Nurse with more than 10 years of experience caring for patients. Well-organized and detail-oriented Compliance Officer with key experience in multiple healthcare environments. Knowledgeable about enforcing Federal Regulations for Healthcare providers. Focused on maintaining consistence, quality and compliance in all areas.

## Skills

- Wound Management
- Unit administration
- Medication and IV administration
- Patient rights advocacy
- Mentoring and coaching
- Seizure management
- Patient Care and Education
- Patient Management
- Patient Care
- Workflow and Patient Management
- Policy and procedure compliance
- Staff Development and Precepting
- Tracheostomy care
- Telemetry and Advanced Cardiac Care
- Intravenous Therapy and Blood Withdrawal Certification
- Nursing Plan Development
- Ventilator care
- Diabetes management
- Post-Anesthesia Care Unit (PACU) Certification
- Charting Medication Administration
- Patient Assessment and Care
- Electronic Health Records Management
- Gastrostomy tube care
- Agency inspection support
- Computer skills
- PPE use
- Critical thinking
- Planning
- Microsoft Office
- Clerical
- Troubleshooting
- Project planning
- Trend monitoring
- Compliance reviews
- Federal regulations
- State regulations
- Field investigations
- Data entry
- Interviewing techniques
- Background review
- Investigative reporting

## Experience

April 2019  
to  
Current

### Texas HHSC - Healthcare Regulation Nurse III

Tyler, TX

- Organized and maintained all files related to regulatory actions.
- Monitored regulatory change required by new and revised laws and regulations, communicating complex protocols and determining operational impacts.
- Managed regulatory change required by new and revised laws and regulations, communicating complex requirements and identifying operational impacts.
- Evaluated Facility operations to determine compliance with Federal and State statutes.

- Established and oversaw Federal and State regulatory procedures.
- Worked successfully with diverse group of coworkers to accomplish goals and address issues related to healthcare regulation
- Prioritized and organized tasks to efficiently accomplish service goals.
- Juggled multiple projects and tasks to ensure high quality and timely delivery.
- Demonstrated self-reliance by meeting and exceeding workflow needs.

July 2018  
to  
March 2019

**Palestine Regional Medical Center**

Palestine, TX

**Staff RN ICU**

- Reviewed physician orders and administered therapies, treatments and medications.
- Explained treatment procedures, medication risks, special diets and physician instructions to patients.
- Maintained reports to provide oncoming shift with full patient status.
- Collaborated with interdisciplinary healthcare professionals to create, implement and adapt individualized care plans.
- Prioritized patient care assignments based on patient conditions to achieve optimal outcomes.
- Facilitated strategic goals aimed at increasing satisfaction and improving outcomes through compassionate, precise and high-quality nursing care.
- Mentored new nurses on practices and procedures to drive patient outcome goals.
- Instructed patients, families and caregivers on diagnoses, chronic disease management and medication self-management.
- Administered medications, tracked dosages and documented patient conditions.
- Monitored and educated nursing students and externs on proper care procedures and prioritization strategies.
- Developed care plans complete with effective nursing measures to improve patients' mental and physical health.

June 2016  
to  
June 2018

**Choice Home Care**

Palestine, TX

**Home Health Registered Nurse**

- Developed care plans, covering goals based on nursing diagnosis and incorporating therapeutic, preventive and rehabilitative nursing actions.
- Utilized learned nursing skills for wound care, vital sign checking and medication assistance.
- Notified physicians of all changes in patients' conditions.
- Provided home health aide care providers with training, guidance, support and supervision to achieve objectives.
- Completed initial assessments of patients and family to determine and address individual home care needs.
- Conducted regular re-evaluations to address changes in needs and conditions, introducing revisions to care plans as needed.
- Charted changes in patient conditions and discussed concerns with supervising healthcare provider.
- Addressed patient care needs, collected vitals, dressed wounds and managed catheters.

February 2016  
to  
May 2016

**Greenbriar Nursing Center**

Palestine, TX

**Director of Nursing**

- Assessed competency of clinical staff to promote quality, continuity and safety.



- Oversaw new nursing employee orientation process, including explanation of personnel policies and individual duties.
- Administered executive supervision, exercising independent judgment to select proper course of action in policies and procedures.
- Implemented changes needed to correct deficiencies found during government inspections.
- Coordinated medical and health services in compliance with government regulations and policies set by board of trustees.
- Communicated with patients with compassion while keeping medical information private.
- Collaborated with multi-disciplinary staff to improve overall patient care and response times.

March 2015  
to  
February 2016

**Palestine Regional Medical Center** Palestine, TX  
**Staff RN ICU**

- Reviewed physician orders and administered therapies, treatments and medications.
- Explained treatment procedures, medication risks, special diets and physician instructions to patients.
- Maintained reports to provide oncoming shift with full patient status.
- Collaborated with interdisciplinary healthcare professionals to create, implement and adapt individualized care plans.
- Facilitated strategic goals aimed at increasing satisfaction and improving outcomes through compassionate, precise and high-quality nursing care.
- Instructed patients, families and caregivers on diagnoses, chronic disease management and medication self-management.
- Mentored new nurses on practices and procedures to drive patient outcome goals.
- Monitored and recorded patient condition, vital signs, recovery progress and medication side effects.
- Supervised nurse administration of oral, intramuscular and IV medications to patients as prescribed, monitoring responses for adverse reactions.
- Answered patient questions and provided take-home materials for further information.
- Monitored and educated nursing students and externs on proper care procedures and prioritization strategies.
- Imparted medical, operational and patient care knowledge to junior nurses, supporting personal growth and enhancing professional development.

October 2014  
to  
February 2015

**Huntsville Memorial Hospital** Huntsville, TX  
**Staff RN - Medical**

- Cared expertly for individuals with wide array of medical issues such as pulmonary, cardiology and infectious disease patients.
- Delivered physician-ordered treatments and monitored responses to quickly spot complications and side effects.
- Assessed patients using comprehensive evaluation techniques and sound clinical judgment.
- Developed and implemented individualized care plans to meet each patients' unique needs.

- Improved care outcomes with proactive education, communication and guidance for patients and family members.
- Recorded actions or behaviors of clinical significance in electronic chart and kept physicians informed.
- Demonstrated high degree of confidentiality, positive interpersonal skills and adaptability in fast-paced and unpredictable medical environment.
- Performed nursing tasks to deliver high level of care and comply with procedures and regulations.
- Championed new nursing care pathways and trends and improved health service to community.
- Participated in bedside reporting and handoff at change of shift and for patient transfers.
- Administered medications and treatments as directed and as appropriate for patient's medical care in collaboration with multi-disciplinary team.

August 2013  
to  
October 2014

**Huntsville Memorial Hospital**  
**Clinical Manager**

Huntsville, TX

- Encouraged high morale and staff retention through effective communication, prompt problem resolution, proactive supervisory practices and facilitation of proactive work environment.
- Supervised 60 staff members and provided periodic performance evaluations.
- Employed active listening and interpersonal talents to effectively interact with various individuals, including physicians, patients and fellow employees.
- Delegated tasks to each member of staff and oversaw task completion, offering assistance to promote success.
- Interviewed applicants and made recommendations for new hires.
- Managed clinical operations and procedures, including enforcing adherence to federal and state regulations and healthcare law requirements.
- Enforced compliance with local, state, and federal healthcare regulations, including Medicare and Medicaid requirements, HIPAA and OSHA.
- Coordinated weekly work schedules for all department employees.
- Developed and initiated departmental goals, standards of performance, policies and procedures.
- Provided clinical oversight for over 40 patient beds.

April 2012  
to  
July 2013

**RN Correctional Managed Care**  
**Nurse Manager III**

Huntsville, TX

- Served as manager for Offender Step 2 Medical Grievance Program in the state correctional facilities.
- Ensured the University Medical Providers were in compliance with policy and procedures and standards of care for an incarcerated population of over 150,000 men and women serving time in the state correctional facilities.
- Assigned tasks to associates to fit skill levels and maximize team performance.
- Trained employees on additional job positions to maintain coverage of roles at all times.

May 2009  
to  
March 2012

**UTMB, Correctional Managed Care**  
**RN Charge Nurse**

Huntsville, TX

- Provided medical care to incarcerated patients in an outpatient and inpatient setting.

- Managed care for patients with complex medical conditions.
- Provided assessments, administered medication, coordinated with physicians patient medical care.
- Monitored delivery of patient care for entire unit, including implementation of care plans.
- Coordinated care with physicians and other clinical staff to prepare for treatment, carry out interventions and enhance continuum of care.
- Oversaw delivery of high-quality, cost-effective care with focus on patient safety, comfort and dignity.
- Administered injections, medications and wound care according to needs.
- Monitored and recorded patient condition, vital signs, recovery progress and medication side effects.
- Conducted patient assessments and diagnostic tests to provide physician with important patient health information.
- Supervised nurse administration of oral, intramuscular and IV medications to patients as prescribed, monitoring responses for adverse reactions.

### **Education and Training**

December 2006 **University of Texas**  
**Bachelor of Science: Nursing**

Tyler, Palestine

### **Professional License**

NURSING LICENSES - RN Expires: January 2022 State: TX - Multistate

# Carrie Storms



## **OBJECTIVE**

To gain employment in healthcare.

## **QUALIFICATIONS**

Active Kentucky RN license # 1071142.

20 years of survey experience using CMS regulations, protocols, and guidelines.

10 years of survey experience using VA State Veteran's Home standards, protocols, and guidelines.

## **EXPERIENCE**

**Surveyor, Ascellon Corporation; Landover, Maryland — March 2010-November 2020**

Conduct state Veteran Home surveys in all 50 states and Puerto Rico. Conduct CMS surveys in Georgia and South Carolina.

**Health Care Surveyor, Office of the Inspector General; Louisville, Kentucky — March 2003-September 2009**

Served as team leader and surveyor for all levels of care for state agency. Conducted routine and complaint surveys in accordance with CMS and Office of Inspector General guidelines. Prepared statements of deficiencies and complaint narratives within established guidelines. Retired from state government October 1st, 2009.

**Director of In-Service Training, Hazelwood Center; Louisville, Kentucky — May 2002-March 2003**

Director of in-service training for 200 bed ICF/MR facility. Coordinated and conducted training to ensure staff competency in providing care to ICF/MR.

**Health Care Surveyor, Office of Inspector General; Louisville, Kentucky — October 1999-May 2002**

Served as team leader and surveyor for state agency. Conducted routine and complaint surveys in accordance with CMS and Office of Inspector General guidelines. Prepared statements of deficiencies and complaint narratives within established guidelines.

**Floor Nurse, Charge Nurse, Supervisor, Director of Nursing, Hazelwood Center; Louisville, Kentucky – December 1989-October 1999**

Began employment as floor nurse LPN. Promoted to charge nurse, supervisor, then Director of Nursing after getting RN. Responsible for all aspects of patient care and nursing employees.

**Agency Nurse, Amserv Nursing Agency; Louisville, Kentucky – September 1989-November 1989**

Provided direct care to nursing facility patients throughout Louisville vicinity.

**LPN Charge Nurse, Assistant Director of Nursing, Medco Center; Brandenburg, Kentucky – April 1987-November 1989**

Provided direct patient care to nursing facility patients as well as Assistant Director of Nursing duties.

**LPN Charge Nurse, Catalpa Manor; Dayton, Ohio – October 1986-April 1987**

Provided direct patient care to nursing facility patients

**LPN Charge Nurse, Assistant Director of Nursing, In-Service Staff Educator, Medco Center; Brandenburg, Kentucky – July 1981-October 1986**

Provided direct patient care to nursing facility patients. Provided staff in-service education and Assistant Director of Nursing duties.

## **EDUCATION**

McKendree College, Radcliff, Kentucky – Bachelor of Science in Nursing, 1995

Jefferson Community College, Louisville, Kentucky – Associate Degree in Nursing, 1992

Spencerian College, Louisville, Kentucky – Practical Nursing, 1981

Sinclair Community College, Dayton, Ohio – Allied Health and General Studies, 1977-1978

Enterprise Community College, Enterprise, Alabama – General Studies, 1977

## **TRAINING**

VA State Veteran's Home Survey Training, Basic Hospice Training Course – Baltimore, Maryland, January 24-25, 2006

Centers for Medicare and Medicaid Certificate of Training, CMS Basic Health Facility Home Health Agency – Dallas, Texas, October 18-20, 2005

Centers for Medicare and Medicaid Certificate of Training, Psychiatric Hospital Surveyor Training – Baltimore, Maryland, March 7-9, 2005

Centers for Medicare and Medicaid Certificate of Training, CMS Basic Hospital Surveyor Training – Dallas, Texas, January 24-28, 2005

Centers for Medicare and Medicaid Certificate of Training, Basic Long Term Care Health Facility Surveyor Training — Hunt Valley, Maryland, May 1-5, 2000

Centers for Medicare and Medicaid Certificate of Training, ICF/MR Surveyors Training Course — San Francisco, California, January 31-February 4, 2000

**REFERENCES AVAILABLE UPON REQUEST.**

# Lillie Charlene Clay

*Nursing Supervisor professional with extensive Correctional and Health Service experience*

## SUMMARY OF QUALIFICATIONS

- More than 20 years of supervisory experience.
- Proven ability to lead effective survey team.
- 18 years of Investigative experience.
- History of Correctional nursing and supervising nurses.
- Adept at planning, organizing and implementing.
- Hard working, able to multi-task effectively.
- Outstanding leadership and communication skills.

## PROFESSIONAL EXPERIENCE

Contract Survey Consultant 2019 -2020  
Independent Contractor with the temp service for the Department of Health Service.

**Facility Survey Consultant II, Raleigh, NC** 2005 - 2018

### *Supervisor*

- Supervise team members on-site and coordinate survey schedules.
- Coach, develop and guide staff on issues related to conducting surveys.
- Making compliance decisions and processing the associated survey kits and enforcement packets.
- Train employees, prepare monthly schedules, monitor and evaluate performance.
- Review of documentation associated surveys and enforcement and maintain public contact.

**Facility Survey Consultant I, Raleigh, NC** 2002 - 2005

### *Team Member*

- Traveled to Nursing Home facilities and conducted surveys.
- Processed the associated survey and enforcement packets.
- Team lead follow up surveys and complaint surveys.
- Conducted initial licensure, complaint and routine inspections in these facilities to determine compliance with state licensure statues and rules

**Nurse Educator Director, Raleigh, NC** 2001 2002

### *Director*

- Responsible for training for Medical section of the Department of Correction for the state of North Carolina.
- Developed the Medication Technician Program for the Department of Correction

**Regional Nurse Supervisor, Raleigh, NC** 1998 - 2001

### *Supervi or*

- Assisted the DON in planning, development, coordination and implementation of health care to the Central Health Care Region facilities
- Provided clinical supervision of nursing staff and responsible for 13 annual employee evaluations.
- Audited and monitored the delivery of health care
- Promoted to Nurse Educator to help develop the Medication Technician Program to save money.

**Lead Nurse, Bunn, NC** 1995 1998

- Responsible for staff scheduling, time sheets, monthly reports, annual reviews, employee performance management
- Responsible for Physician clinics, overseeing and managing medical emergencies.

**Nash Community College, Rocky Mt North Carolina**

*A.D. N. degree in Nursing, (1994)*

Keywords: Director, Regional Supervisor

# Cynthia Hernandez, RN



## Summary:

- Emergency Room, Trauma, Triage, PACU, Dialysis, Medical/Surgical Units, Psychiatric Wards, Workman's Comp.
- Staffed numerous positions at various facilities in hospitals, surgery centers, medical offices, correctional institutions and Registry facilities.

## Skills:

Patient Assessments, Monitor patient progress, Post-Op Anesthesia Aldrete Scoring, Conscious Sedation Monitoring, Foley Catheters, Chest Tubes, Monitor and Assess Carotids, Administering IVs-Dopamine, Nitro, Insulin Drips, PICC Lines and Blood Transfusions, EKGs, Monitor Pacemakers, charge nurse, audit charting, NG Tubes, Casting, One Legacy Protocols, SART Team, CPS Protocols, CDC Bookings and chartings, Writing 5150s.

## Education:

AS

New York University

Associate Arts Degree

East Los Angeles College.

General Education

Rio Hondo College

Attending for BSN

June 2019

Chamberlain University

## Certifications:

- American Health Association Certifications: MICN, SART, PALS, ACLS, BLS, PICC Line TNCC.
- Crisis Prevention Institute: CPI Certification.

## License:

California Registered Nurse License #RN591197/TX RN# 178176.

## Work Experience:

### CDPH Health Evaluator Nurse

2018 - Present

- Licensing and Certifying facilities.
- Investigate Complaints for State and Federal.
- Investigate Entity Reported Incidents.
- ESRD Facilities.
- ICF Facilities.
- Home Health Facilities.
- GACH.
- SMQT Certified.

### Genex

2015 - 2018

Field Case Manager for Workman's Compensation patients. (Per Diem).

- Scripps Healthcare San Diego E.R. Facilities at Chula Vista, Encinitas, Hillcrest. (Full Time).

### JFK Memorial Hospital, Indio, CA

2009 - 2015

- Emergency Room/Triage.



# Cynthia Hernandez, RN



- PACU.
- Pre-Op.

## **Airflight Nursing**

**2001 - 2010**

- Correctional Institute for Women/Triage.
- Master Staffing Registry.
- Westways Registry.
- Western Medical Center.
- StarMed Health Care Registry.
- Hemet Medical Center.

## **Arrowhead Country Hospital**

**2000 - 2001**

- Emergency Room/Triage.
- Psychiatric Ward.

## **Gambro Dialysis Center**

**1999 - 2000**

- Dialysis Chronic Unit.

## **Garfield Community Hospital**

**1998 - 1999**

# DENISE ROGERS-MURRAY

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## WORK EXPERIENCE

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**Branch Manager, Division of Health Service Regulation** Raleigh, NC  
**North Carolina Department of Health and Human Services** 2003-2021

- Supervised survey teams of 30 including registered nurses, dietitians, social workers, pharmacists
- Provided feedback to employees on job performance and conducted performance reviews
- Interviewed and hire new employees; provided employee counseling and coaching
- Clarified new information, policies, and procedures to employees
- Reviewed survey reports to ensure compliance with principles of documentation and regulations
- Reviewed State Agency Management Reports and monthly activity reports

**Survey Team Leader/Coordinator, Division of Health Service Regulation** Raleigh, NC  
**North Carolina Department of Health and Human Services** 1993-2003

- Conducted on-site inspections of long-term care facilities to determine compliance with Medicare and Medicaid
- Conducted observations, interviews and medical review with residents and staff
- Completed written reports of findings at completion of surveys
- Supervise teams of 6-10 members (registered nurses, dietitians, social workers, pharmacists)
- Provide training and develop materials for training of new staff members

**Long Term Care Supervisor, Division of Facility Services** Raleigh, NC  
**North Carolina Department of Health and Human Services** 1991-1993

- Determined compliance with over 300 federal regulations for participation on Medicare/Medicaid
- Performed surveys of long-term care facilities
- Evaluated quality of care, pharmacy, nutrition, and physical environment for residents
- Prepared written deficiency statements and reviewed plans of correction

## ADDITIONAL EXPERIENCE

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**Buyer Merchandiser, Kraft Foodservice, Inc., Cincinnati, OH** 1986-1991  
**Buyer – Supervisor, Moses H. Cone Hospital, Greensboro, NC** 1982-1986  
**Instructor, Basic Nutrition Course, Bennett College, Greensboro, NC** 1982  
**Dietetics Intern, Moses H. Cone Hospital** 1981  
**Student Nutritionist, United Day Care Services, Greensboro, NC** 1980

## CERTIFICATIONS

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**SMQT Certified Surveyor**  
**Registered Dietitian**  
Commission on Dietetic Registration, Academy of Nutrition and Dietetics

## EDUCATION

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**Master of Science, Food and Nutrition** 1982  
**Bachelor of Science, Home Economics, Dietetics Specialization** 1979  
North Carolina Agricultural and Technical State University, Greensboro, NC

# EDWARD J ROTH

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## OBJECTIVE

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To obtain a position utilizing my expertise on federal regulations for long term care facilities and survey process. To aide in the improvement of living conditions for those living in long term care facilities.

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## EXPERIENCE

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CertiSurv, LLC  
Health Facilities Surveyor 09/2019 to Present

Oklahoma State Department of Health  
Health Facility Surveyor III 02/2005 to Present

Complete Health Facility Surveys and complaint investigations. Monitor and evaluate clinical records for compliance with federal and state regulations. Intern team supervisor October 2007 through December 2010. Type deficiencies when facilities are not following federal and state regulations. Complete all other reports as needed. Coordinated and schedule surveys, assist with performance reviews, review reports for accuracy as acting team leader since October 2007.

Oklahoma State Department of Human Services Developmental Disabilities Service  
Case Manager II 02/2002 to 02/2005

Monitor and evaluated services provided to individuals with disabilities. Make home visits and review clinical records to make sure they are in compliance with policy as written by the State Department of Human Services. I monitor and evaluate service providers to ensure quality service is being provided and advocate for the rights of those individuals receiving the services. Report any findings of abuse or neglect to proper reporting agency. Complete guardianship assessments and attend court as needed. Team leader for all meetings and coordinate all services for the individual receiving services. Team leader for coordinating placements of individuals receiving services. Trained new employees on policy, regulations and programs. Monitored and evaluated clinical records to ensure proper documentation, medication orders and all physicians' orders are being followed. Monitored and evaluated medication regimes and submitted reports quarterly to the school of pharmacy for recommendations and review. Monitored and evaluated homes for health and safety compliance.

Oklahoma State Department of Human Services Family Support Division  
Family Support Specialist 12/27/1999 to 02/2002

Worked with individuals receiving assistance through the food stamps, medical, and day care programs. Worked cases in compliance with state and federal polices and regulations. Interpreted policy and regulations when working cases and applied them to the individual cases to see if requirements are meet for eligibility in the programs. Reported suspected fraud to appropriate agencies. Trained new employees on police, regulations, and department procedures. Assisted with referrals to outside agencies as needed.

Oklahoma State Department of Human Services Child Welfare division  
Child Welfare Specialist 01/1999 to 12/1999

Conducted and lead investigations of reported child abuse and neglect. Interviewed victims, alleged perpetrators and third part witnesses. Compiled all information and reported the findings to the District Attorney's office. Monitored and evaluated families on case load linking them to services needed within the community. Team leader for all meetings held between court hearings and made visits to homes where children were placed. Completely monthly reports on all cases, court reports and staffing reports to immediate supervisor.

Sears

Lead Sales associate/assistant Manager 05/1992 to 01/2000

Retail sales in various departments, providing customer service and follow up after sales. Responsible for display sets and signing weekly and ensuring inventory was up to date. Responsible for performance reviews of the four sales associated that worked in my department.

Boy Scouts of America –various volunteer positions 1988 to current

- Scout Master
- Assistant Scout Master
- Committee Chairman
- At large troop/pack committee member

Home Teacher with the Church of Jesus Christ of Latter Day Saints 1998 to current

Big Brothers and Little Sister of Greater Lansing Michigan 1997 to 1998

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## EDUCATION

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Michigan State University school of Human Ecology

Bachelor of Science in Family and Community Services 1999

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## AWARDS AND ACKNOWLEDGEMENTS

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- Eagle Scout Boy Scouts of America
- Distinguished Citizen 1989 Perry Michigan
- Brotherhood membership of the Order of the Arrow
- Top sales volume for four years in a row 1993 through 1996 Sears East Lansing Michigan
- Top maintenance agreement sales four years in a row 1993 through 1996
- Chapter Chief for the Shiawassee district of the Order of the Arrow 1986 to 1987
- Executive Board Member for Order of the Arrow CUE lodge 218, Tall Pine Council 1987 to 1988
- Selected to participate in the 75<sup>th</sup> anniversary of Boy Scouts of America Jamboree 1985 at Fort AP Hill
- Council on Licensure, Enforcement and Regulation (CLEAR) certified basic investigator
- Council on Licensure, Enforcement and Regulation (CLEAR) certified advanced investigator

# ESTER LEVYASH, R.N., B.S.N.

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***Compassionate, Dedicated and Service-Driven Registered Professional Nurse***- Seeking a challenging nursing position where my skills, knowledge and experienced can be enhanced and utilized to promote health, and competent quality care to the client and the community.

- ◆ Bilingual (Russian-English)
- ◆ Strong leadership and management skills.
- ◆ Hardworking, energetic; flexible; easily adapting to change of environment and schedule.
- ◆ Maintain critical thinking skills essential to providing competent and dignified patient care.
- ◆ Personable with a positive attitude; interface effectively with patients, families, and nursing staff.
- ◆ Detail Oriented; Strong organizational, time management and written communication skills.
- ◆ Skilled Health Care Evaluator.
- ◆ Significant supervisory and leadership expertise.
- ◆ Strong critical thinking and problem solving.
- ◆ Outstanding ability to facilitate groups and collaborate with interdisciplinary teams.
- ◆ Proven ability to build positive relationships with team members and other medical professionals.

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## **WORK EXPERIENCE:**

**Health Facilities Surveyor: CertiSurv, LLC.: January 2021 - Present**

**Regional Director of Risk Management: Marquis Heath Services; September 2020 - Present**

**Responsibilities:**

- ◆ Responsible for providing risk management consulting services to 9 long term care facilities and 1 ALF in the Mid-Atlantic region.
- ◆ Conduct facility visits to complete root cause analysis for clinical metrics trending in a negative pattern.
- ◆ Completing analysis of systems and processes to mitigate risk for litigation and as well as regulatory risk.
- ◆ Developing QAPI plans with facility leadership and regional nurses based on results of the root cause analysis.
- ◆ Weekly visits to validate plans are being followed and are effective for providing positive outcomes.
- ◆ Oversee the operation of the Rapid Response Call protocols.
- ◆ Provide support to facilities, regional clinicians and operators on an as needed basis.

**Health Care Services Evaluator/Nurse, SMQT Certified: NJDOH, Health Facility Survey & Field Operations; Aug. 2017-September 2020**

**Responsibilities:**

- ◆ Inspect licensed or Medicaid certified health facilities in New Jersey to ensure they meet standards of quality care as well as state and federal regulations and investigate complaints from the public as a former complaint's investigator.
- ◆ Facilitate the intake of complaints from the public and assign appropriate triage level depending on the immediacy and severity of the alleged violations.
- ◆ As a complaint's investigator worked independently, and occasionally as part of a team to investigate complaints from the public to determine if the complaint can be substantiated.
- ◆ Participates individually and/or as a team member in the inspection and survey of Health Care Facilities state-wide.
- ◆ Surveys include initial, annual and complaint investigations to determine compliance with State Standards for licensure and/or Federal Regulations for certification specific to Long Term Care, Dementia Care, Residential Care facilities.

- ◆ Surveys are conducted in accordance with unit protocols, Centers for Medicare & Medicaid Services requirements and State Operations Manual (SOM).
- ◆ Inspect and evaluate factors such as patient/resident care, dietary services, activities, social services, rehabilitation services and other special areas.
- ◆ Compiles, reviews and analyzes data and prepares detailed reports relative to survey findings.
- ◆ Participates in off-hour visits in Health Care Facilities.
- ◆ Make decisions based on the above survey visits to determine regulatory compliance.
- ◆ Assists with telephone coverage for hotline calls.
- ◆ Supports the team in meeting objectives to accomplish work assignments.
- ◆ Treats each team member with respect and willingly cooperates with others who hold different views to complete the task at hand.
- ◆ Conducts surveys and/or investigate complaints of all licensed health care facilities for compliance with state and federal regulations.
- ◆ Recommends certification and/or recertification when substantial compliance is achieved.
- ◆ Identify and analyzes problems and exhibits a logical approach to problem solving.
- ◆ Proficient at using observation skills for gathering information during surveys.
- ◆ Proficient at interview skills for staff, residents and family during surveys.
- ◆ Proficient at performing record reviews in accordance with Federal and State regulations.
- ◆ Review, analyze and interpret data and information compiled to prepare survey investigation reports.
- ◆ Establishes a non-adversarial relationship with health care facilities.
- ◆ Prepare detailed reports of survey investigation findings and recommendations related to compliance within Federal and State regulation guidelines.
- ◆ Prepare detailed 2567 deficiency reports using Principals of Documentation.
- ◆ Review, accept and/or reject facility Plans of Correction submitted by healthcare providers.
- ◆ Submits reports in accordance with established procedures.
- ◆ Submits Survey packet in accordance with established procedures.
- ◆ Proficient in computer systems used by the agency office: ACTS, ASPEN Complaint and Incident Tracking, and ASPEN systems.
- ◆ Preceptor for new surveyors.
- ◆ Attend IDR, prepare IIDR and provides testimony for legal actions as required.
- ◆ Maintain credentials, professional licenses and continuing education programs as required.
- ◆ Attends department meetings as scheduled and reports information to the team members as appropriate.
- ◆ Prepare, review and submit survey packets as required.
- ◆ Effectively communicate and interface with facility management and staff throughout the duration of the survey.
- ◆ Step in as Team Coordinator in the absence of the Team coordinator performing duties as below:
  - ◆ Manage and Supervise team members navigate the new Long-Term Care Survey Process.
  - ◆ Delegate specific team assignments and instruction to the team members.
  - ◆ Supervises team members during investigations on each survey.
  - ◆ Reviews each team member's deficiency writing prior to submission for supervisory review.

**Assistant Director of Nursing: Hamilton Grove, Hamilton, NJ: July 2014 –Feb 2016 and March 2017-July 2017**

**Responsibilities:**

- ◆ Assists the Director of Nursing Services in directing the activities of licensed and non-licensed personnel who provide health care and nursing services to residents of the 218 bed Long Term Care (LTC) and Sub-Acute Rehabilitation (SAR) facility on a 24 hour, 7 day a week basis. Manage and direct Nursing Department in absence of Director of Nursing (DON).
- ◆ Develop and maintain an environment that supports the professional nurse, provide leadership, and direction to assigned staff. Assist the director with staff counseling, staff evaluation and staff development.
- ◆ Assist the DON in managing clinical operations of the nursing department.

- ◆ Assist the DON in planning and assigning workload to nursing staff on shift basis.
- ◆ Assist the DON in supervising and guiding nursing staffs on their daily job duties.
- ◆ Ensure nursing staffs follow facility procedures and policies.
- ◆ Identify department issues and recommend corrective actions.
- ◆ Analyze audit results and implement audit recommendations.
- ◆ Address resident/family/visitor grievances and complaints promptly to ensure satisfaction.
- ◆ Ensure that nursing staff perform assigned duties accurately and timely.
- ◆ Assist the DON in evaluating the performance of nursing department and recommend improvements.
- ◆ Assist the DON in creating nursing programs that comply with federal, state and local regulations.
- ◆ Work in close collaboration with the local DOH to manage a Legionella outbreak in the facility and prepare reports as required.
- ◆ Make clinical rounds of all stations a minimum of two times per day.
- ◆ Conduct clinical assessment; use critical thinking and coordinate professional standards of care.
- ◆ Responsible for wound/skin rounds weekly and as needed on all facility wounds, wound report maintenance and submission, and wound QAPI.
- ◆ Develop, review and revise care plans to accurately reflect resident needs.
- ◆ Manage incident/accident practices to comply with State/Federal regulations as directed by the DON.
- ◆ Manage and participate in discharge / transfer process to ensure proper nursing services; complete, accurate, and timely documentation.
- ◆ Work alongside the DON, Administrator and HR Dept. to assist with recruiting, interviewing, and hiring new nursing staff.
- ◆ Ensure that all CNA staff are provided with their annual 12 hours of mandatory education and maintain records of education provided.
- ◆ Developed, maintained and implement the families new hire training and orientation for all departments. As well as providing all new hires with orientation and maintaining required records.
- ◆ Responsible for developing, implementing and maintaining the employee health program for the facility, ensuring compliance with all federal, state, local regulations and OSHA standards.
- ◆ Responsible for developing, implementing and maintaining the antibiotic stewardship/infection control & prevention program for the facility, ensuring compliance with all federal, state, and local regulations and OSHA standards. Also responsible for ICP QAPI, preparing reports, analyzing data and surveillance for the facility.
- ◆ Interfaced with representatives of the DOH and Ombudsman's Office on Standard and Complaint Surveys.
- ◆ Assisted in the investigations of accident/incidents and allegations of abuse.
- ◆ Assist the DON in preparing written "call in" reports to the State Department of Health and the Ombudsman's Office regarding all reportable events as required.
- ◆ Responsible to complete all medication error reports, review them with staff member(s) involved and provide education/disciplinary action as required. Responsible for medication error QAPI and report preparation.
- ◆ Monitor and oversee day to day operations of the nursing units.
- ◆ Perform medication and treatment administration observations on all nursing staff on orientation and PRN.

**Director of Nursing: Alaris Healthcare at Hamilton Park, Jersey City, NJ; July 2016-March 2017**

**Responsibilities:**

- ◆ Direct the activities of licensed and non-licensed personnel who provide health care and nursing services to residents of the 280 bed Long Term Care (LTC) and Sub-Acute Rehabilitation (SAR) facility on a 24 hour, 7 day a week basis. Responsible overall facility functions when Licensed Administrator was away.
- ◆ On-call by telephone or in person 24/7 and Weekend administrative on-call as scheduled.
- ◆ Direct Supervision of all Licensed and Certified Nursing Staff.
- ◆ Responsible for the care and well-being of residents in the facility.



- ◆ Oversight of medication and treatment administration so ensure safe and accurate administration within professional standards of practice.
- ◆ Completing and following up on all Pharmacy Consultant Recommendation reviews.
- ◆ Work directly with all facility vendors to ensure that they provide safe, quality and competent services to the facility in accordance with contract obligations.
- ◆ Maintain the Roster and Acuity reports for evaluation.
- ◆ Evaluation and Assessment of Wound Management.
- ◆ Responsible for the assessing, developing, implementing and evaluating an appropriate plan of care for each resident.
- ◆ Assist in the coordination of healthcare services for all residents.
- ◆ Maintain Training and Educating programs for facility staff.
- ◆ Participated as an active member of the Interdisciplinary Care Team.
- ◆ Participated in Care Conference.
- ◆ Audited Medical Records for compliance with state and federal regulations.
- ◆ Actively participated in the Quality Assurance & Performance Improvement monthly, quarterly and annual meetings.
- ◆ Identify areas that need improvement. Developing, implementing and evaluating Quality Assurance & Performance Improvement projects on an ongoing basis.
- ◆ Responsible for the oversight of staffing needs and schedules for all licensed and certified staff.
- ◆ Plan and assign workload to nursing staffs on shift basis.
- ◆ Recruit, interview and hire License nurses and Certified Nursing Assistants for employment.
- ◆ Completed annual employee evaluations and provide disciplinary action for staff as needed.
- ◆ Ensure nursing staffs follow facility procedures and policies.
- ◆ Ensure that nursing programs, policy and procedures comply with federal, state and local regulations.
- ◆ Interfaced with representatives of the DOH and Ombudsman's Office on Standard and Complaint Surveys.
- ◆ Provided written "call in" reports to the State Department of Health and the Ombudsman's Office regarding all reportable events as required.
- ◆ Run the investigations of accident/incidents and allegations of abuse. Responsible for facility Fall QAPI.
- ◆ Provided marketing services in the community and Acute Care facilities.
- ◆ Direct oversight of facility Antibiotic Stewardship and Infection Control & Prevention programs.

**Assistant Director of Nursing: Avista Healthcare, Cherry Hill, NJ; Feb 2016-July 2016**

**Responsibilities:**

- ◆ Assists the Director of Nursing Services in directing the activities of licensed and non-licensed personnel who provide health care and nursing services to residents of the 162 bed Long Term Care (LTC) and Sub-Acute Rehabilitation (SAR) facility on a 24 hour, 7 day a week basis. Manage and direct Nursing Department in absence of Director of Nursing (DON).
- ◆ Manage and direct Nursing Department in absence of Director of Nursing (DON).
- ◆ Develop and maintain an environment that supports the professional nurse, provide leadership, and direction to assigned staff. Assist the director with staff counseling, staff evaluation and staff development.
- ◆ Assist the DON in managing clinical operations of the nursing department.
- ◆ Assist the DON in planning and assigning workload to nursing staff on shift basis.
- ◆ Assist the DON in in supervising and guiding nursing staffs on their daily job duties.
- ◆ Ensure nursing staffs follow facility procedures and policies.
- ◆ Identify issues and recommend corrective actions.
- ◆ Analyze audit results and implement audit recommendations.
- ◆ Address resident/family/visitor grievances and complaints promptly to ensure satisfaction.
- ◆ Ensure that nursing staff perform assigned duties accurately and timely.

- ◆ Assist the DON in evaluating the performance of nursing department and recommend improvements.
- ◆ Assist the DON in creating nursing programs that comply with federal, state and local regulations.
- ◆ Make clinical rounds of all stations a minimum of two times per day.
- ◆ Conduct clinical assessment; use critical thinking and coordinate professional standards of care.
- ◆ Responsible for wound/skin rounds weekly and as needed on all facility wounds, wound report maintenance and submission, and wound QAPI.
- ◆ Develop, review and revise care plans to accurately reflect resident needs.
- ◆ Manage incident/accident investigation and reporting practices to comply with State/Federal regulations as directed by the DON.
- ◆ Manage and participate in discharge / transfer process to ensure proper nursing services; complete, accurate, and timely documentation.
- ◆ Work alongside the DON, Administrator and HR Dept. to assist with recruiting, interviewing, and hiring new nursing staff.
- ◆ Developed, maintained and implement the families new hire training and orientation for all departments. As well as providing all new hires with orientation and maintaining required records.
- ◆ Responsible for developing, implementing and maintaining the antibiotic stewardship/infection control & prevention program for the facility, ensuring compliance with all federal, state, and local regulations and OSHA standards. Also responsible for ICP QAPI, preparing reports, analyzing data and surveillance for the facility.
- ◆ Interfaced with representatives of the DOH and Ombudsman's Office on Standard and Complaint Surveys.
- ◆ Assisted in the investigations of accident/incidents and allegations of abuse.
- ◆ Assist the DON in preparing written "call in" reports to the State Department of Health and the Ombudsman's Office regarding all reportable events as required.
- ◆ Monitor and oversee day to day operations of the nursing units.

**Sub-Acute Unit Manager: Hamilton Continuing Care Center, Hamilton, NJ; Feb.2013 -July 2014**

**Responsibilities:**

- ◆ Direct oversight of a 35 bed sub-acute rehab unit and all the day-to-day operations on the unit.
- ◆ Process all new admissions, ensure needed supplies are available, and facilitate safe discharge back to the community.
- ◆ Review and audit all new admission charts to ensure compliance with facility policy, state and federal regulations.
- ◆ Develop, review and revise care plans to accurately reflect resident needs.
- ◆ Identify issues on the unit and take corrective actions.
- ◆ Assess, plan, coordinate, and evaluate residents' care with the interdisciplinary team.
- ◆ Maintain the Roster Matrix, Census and Conditions and Acuity reports daily.
- ◆ Manage and participate in discharge / transfer process to ensure proper nursing services; complete, accurate, and timely documentation.
- ◆ Ensure nursing staffs follow facility procedures and policies and remain compliant with all regulatory requirements.
- ◆ Medication and treatment administration.
- ◆ Make clinical rounds of all stations a minimum of two times per day.
- ◆ Conduct clinical assessment; use critical thinking and coordinate professional standards of care.
- ◆ Complete performance evaluations as required and review them with unit staff.
- ◆ Provide education and disciplinary action to unit staff as needed.
- ◆ Fill in as facility supervisor as needed on weekends or off shift.
- ◆ Attend IDCP team care conferences and interface effectively with the team, residents and their families/care givers.

**Long-Term Care Unit Manager: CareOne at King James, Atlantic Highlands, NJ; Nov.2011 - Feb.2013**

### Responsibilities:

- ◆ Direct oversight of two long-term care units totaling 79 beds and all the day-to-day operations.
- ◆ Ensuring state and federal regulatory compliance, implementing corrective actions when necessary.
- ◆ Process all new admissions, ensure needed supplies are available, and facilitate safe discharge back to the community.
- ◆ Review and audit all LTC resident as well as new admission charts to ensure compliance with facility policy, state and federal regulations.
- ◆ Develop, review and revise care plans to accurately reflect resident needs.
- ◆ Identify issues on the unit and take corrective actions.
- ◆ Assess, plan, coordinate, and evaluate residents' care with the interdisciplinary team.
- ◆ Maintain the Roster Matrix, Census and Conditions and Acuity reports daily.
- ◆ Manage and participate in discharge / transfer process to ensure proper nursing services; complete, accurate, and timely documentation.
- ◆ Ensure nursing staffs follow facility procedures and policies and remain compliant with all regulatory requirements.
- ◆ Medication and treatment administration.
- ◆ Make clinical rounds of all stations a minimum of two times per day.
- ◆ Conduct clinical assessment; use critical thinking and coordinate professional standards of care.
- ◆ Complete performance evaluations as required and review them with unit staff.
- ◆ Provide education and disciplinary action to unit staff as needed.
- ◆ Attend IDCP team care conferences and interface effectively with the team, residents and their families/care givers.

### Primary Nurse/Unit Manager: The Rehab Center at Wedgwood Gardens, Freehold, NJ; Mar. 2010 - Nov.2011

#### Responsibilities:

- ◆ Assess, plan, coordinate, and evaluate residents' care with the interdisciplinary team.
- ◆ Responsible for day-to-day operations of a 32 bed long term care unit, later promoted to sub-acute unit manager responsible direct oversight of a 60 bed sub-acute unit.
- ◆ Direct oversight of all unit the day-to-day operations.
- ◆ Ensuring state and federal regulatory compliance, implementing corrective actions when necessary.
- ◆ Process all new admissions, ensure needed supplies are available, and facilitate safe discharge back to the community.
- ◆ Review and audit all LTC resident as well as new admission charts to ensure compliance with facility policy, state and federal regulations.
- ◆ Develop, review and revise care plans to accurately reflect resident needs.
- ◆ Identify issues on the unit and take corrective actions.
- ◆ Assess, plan, coordinate, and evaluate residents' care with the interdisciplinary team.
- ◆ Maintain the Roster Matrix, Census and Conditions and Acuity reports daily.
- ◆ Manage and participate in discharge / transfer process to ensure proper nursing services; complete, accurate, and timely documentation.
- ◆ Ensure nursing staffs follow facility procedures and policies and remain compliant with all regulatory requirements.
- ◆ Medication and treatment administration.
- ◆ Make clinical rounds of all stations a minimum of two times per day.
- ◆ Conduct clinical assessment; use critical thinking and coordinate professional standards of care.
- ◆ Attend IDCP team care conferences and interface effectively with the team, residents and their families/care givers.

### EDUCATION/PROFESSIONAL AFFILIATION

- ◆ **East Brunswick High School Graduate 2004;** High School Diploma
- ◆ **Associate of Science in Nursing, 2009;** Middlesex County College, Edison, NJ

- ◆ **Bachelorette in Nursing-Science 2015;** Kean University, Union, NJ: GPA 3.8
- ◆ **Former NJADONA Board Member:** County Representative on the Board of Directors for NJADONA 2014-2017.
- ◆ **Completed APIC Basic Infection Control Course Oct. 2014;** NJ Hospital Association

### **CREDENTIALS**

- ◆ **NJ State Board of Nursing Registered Prof. Nurse;** License # 26NR14585800
- ◆ **New York State Board of Nursing Registered Prof. Nurse;** License # 626761-1, Certificate # 7024383
- ◆ **Commonwealth of Pennsylvania Board of Nursing Registered Nurse;** License # RN614728
- ◆ **IV Venipuncture Certified by Perivascular Nurse Consultants**
- ◆ ***American Heart Association BLS Health Care Provider CPR&AED Certified***

*REFERENCES FURNISHED UPON REQUEST*

## GAY HENDERSON, RN, BSN, CHFS



### Education:

I graduated from the University of Central Oklahoma in May of 1995, with a Bachelor of Science Degree in Nursing.

### Professional Experience:

I currently have, and have maintained, a registered nurse's license since my graduation in May 1995.

I have been employed as a full time clinical health facility surveyor for the Oklahoma State Department of Health since February of 2009. I have been trained on the new Long Term Care Survey Process. My duties include, but are not limited to, conducting title 19 surveys and abbreviated surveys, writing deficient practice statements, and testifying at informal dispute hearings.

I have attended and received certification for basic and advanced investigative training techniques; which was conducted by the National Council on Investigative Techniques.

### Professional Experience:

I have been employed as a full time nurse surveyor for the Oklahoma State Department of Health since February of 2009. I have been trained on the new Long Term Care Survey Process. My duties include: but are not limited to, conducting title 19 surveys and abbreviated surveys, writing deficient practice statements, and testifying at informal dispute hearings.

CertiSurv, LLC., Health Facilities Surveyor    January 2020 – Present

Gina Campbell

**Director of Nursing – Vi at TidePointe, Broad Creek Care Center**

[REDACTED]

[REDACTED]

[REDACTED]

Looking to return to surveying Long Term Care Facilities

Authorized to work in the US for any employer

## WORK EXPERIENCE

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### **Director of Nursing**

Broad Creek Care Center – Hilton Head, SC

July 2019 to Present

Director of Nursing for a 25 bed Skilled Nursing Facility and 70 bed Assisted Living Facility. Responsible for the day to day operations and direct oversight of the nursing care delivery along with compliance with CMS regulations. Function as the facility Infection Preventionist and monitor all infections in the facility along with other quality issues that arise. During 2020 and 2021 ensured that the facility was prepared for the impact of COVID 19 by creating a COVID unit and training all staff on the proper use of PPE. Successfully underwent three infection control focused surveys and one certification survey with only one citation. Collaborate daily with physicians, pharmacy and local hospitals to ensure timely and efficient care of the residents at the facility. Manage staffing schedules for nursing staff to maintain effective coverage even during times of COVID outbreaks in the facility.

### **Surveyor**

Ascension Corporation – Landover, MD

March 2018 – July 2019

Conduct CMS surveys for contracted states and Veterans Administration Surveys across the country. Responsible for conducting the surveys using the CMS survey process and ASPEN software. Arranged travel, hotels and car rentals for all assignments. Worked as team leader at the survey site and was responsible for gathering all written reports from surveyors on the team to provide to the corporate office for review. On occasion conducted quality assurance review for reports.

### **Medical Facilities Inspector**

Virginia Department of Health – Richmond, Va

June 2014 – March 2018

Responsible for inspecting nursing homes in the State of Virginia to ensure CMS compliance as well as State regulatory requirements. All surveys were assigned by the State office and conducted as directed within the CMS guidelines. Was involved in the changes made to the survey process during the Final Rule and was often assigned as team leader to organize and compile the 2567 for final review.

## **Director of Nursing**

Kendal @ Lexington – Lexington, VA

December 2011 – June 2014

Director of Nursing for a 60 bed skilled nursing facility. Responsible for 56 FTEs, the day to day operations and direct oversight of the nursing care, documentation and compliance to CMS regulations. Monitor quality assurance through chart audit and measurement of outcomes for skilled residents. Provide educational opportunities for all staff and perform needs assessment for future educational needs. Collaborate with physicians responsible for management of care of residents; work closely with pharmacy personnel to ensure appropriate management of medications; promote a positive relationship with local hospital to ensure timely and efficient response for medical emergencies experienced by our resident population. Involved in correcting a survey with 27 CMS citations within 30 days of arrival to the community.

## **Director ICU and Chest Pain Unit**

Augusta Health Community Hospital – Fishersville, VA

February 2005 – December 2011

Responsible for 8 bed medical/surgical ICU and 4 bed post cardiac intervention unit, which was created in response to the growth of cardiac services offered at the hospital. Responsible for 40 FTEs, the day to day operations of both units, including census management and the budget for both units. Monitor quality assurance and performance improvements to align with evidence based practice. Plan, organize, implement and evaluate the delivery of patient care in accordance with Standards of Care, philosophy of the organization, as well as the mission and goals.

## **Education**

### **MSN**

Old Dominion University – Norfolk, VA

2009

### **BSN**

Lynchburg College – Lynchburg, VA

# Heather DeVooght

## Summary:

Seasoned Social Services Case Worker/Investigator who currently works in Long Term Care facilities to ensure facilities remain in compliance with both state and federal regulations. Previously, I organized and managed packages of support to enable service users to lead the fullest lives possible, provided oversight of programs to ensure compliance with internal/external incident reporting to ensure the safest and highest quality of care. Developed plans, communicated initiatives to interdisciplinary team and evaluated effectiveness of services provided. Conducted interviews with service users and their families to assess and review their situation, nurtured positive, productive relationships with clients, families and community providers to promote effective coordination of resources. In addition, offered information and counseling support to service users and their families. Recommended and made decisions about the best course of action in cases such as child protection, mental health, physical health as well as employee misconduct.

## Education:

Bachelor of Arts Criminal Justice 2010  
Augusta State University, Augusta, GA

## Certification:

SMQT Certified.

## Work Experience:

**GA Department of Community Health, Statewide** December 2019 - Present  
**Compliance Specialist II**

Member of Survey team that completes both independent and team surveys and investigations in Health Care Facilities for Annual Re-certification, Focused Infection Control, Re-Visits and IJ Abatement surveys. Also, completes complaint investigations in Health Care Facilities within the Northwest Region/and statewide as needed for the GA Department of Community Health.

**Office of Inspector General, Hopkinsville, KY** September 2018 - November 2019  
**Social Services Specialist**

Member of Survey team that completes inspections in Health Care Facilities for annual certification and or licensure. Also completes complaint investigations in Health Care Facilities within the Western Enforcement Branch Region for the Office of Inspector General.

**TN Department of Human Services, Clarksville, TN** January 2015 - August 30/18  
**Child Protective Services Investigator**

Accessing, identifying and documenting cases of severe abuse and/or neglect among children and finding appropriate services within the community to enhance child wellbeing and safety. Provided counseling and supportive services to children and families requiring assistance, as well as maintaining client records and completed required documentation within specified time frames. Completed legal referrals in addition to filing court petitions and testifying in court hearings.

**Northwestern Human Services/Program Evaluation Unit,** January 2014 - January 2015  
**Philadelphia, PA**

### **Suburban Incident Manager/Investigator**

Responsible for all safety and incident related activities for Adult and Children's Mental Health Services in Delaware, Bucks and Montgomery counties. Conducted high profile investigations while maintaining integrity, objectivity and protecting the confidentiality of all consumers and staff involved. Manage PQI Incident/Safety data for the Case Management, Outpatient and MAST/FACT Service lines. Conducted trainings to programs throughout the Eastern Region on Incident Management, Compliance and PQI Initiatives. Completed monthly reports to senior management on identified trends/patters in incident/risk management.

**GA Department of Human Services, Augusta, GA** October 2012 - November 2013



## **Heather DeVooght**



### **Child Protective Services Investigator**

Accessing, identifying and documenting cases of abuse or neglect among children and finding appropriate services within the community to enhance child welfare and safety. Provided counseling and supportive services to children and families requiring assistance. Maintained client records and completed required documentation within specified time frames.

### **Delaware County Services for the Aging, Eddystone, PA**

**June 2011 - July 2012**

#### **Case Manager II**

Responsible for planning, coordinating and developing social service programs for older adults in the community through the Home & Community Based Service Program. Managed an ongoing caseload of 50+ consumers within the community and assessed consumer's needs and functional levels in order to provide most suitable services. Implemented and monitored ongoing case plans for each consumer.

### **Columbia County Sheriff's Office, Appling, GA**

**August 2009 - December 2009**

#### **Intern**

Participated in ride along with patrol officers during traffic stops, responded to 911 calls and community policing of neighborhoods, local stores and businesses. Participated during evidence examination, including the process of lifting finger prints from suspected items, studying surveillance tapes and crime scene photos. Participated during the intake of arrestees, including, finger printing, mug shots and questioning. Participated with jailers in the patrolling of the women's ward and assisted in running the jail's main control board.

# Jennifer Kosar



I have worked as a health care profession for over 20 years in many different roles. My managerial style reflects the model of Servant Leadership. I proficiently demonstrate knowledge and skills in clinical assessments, EHR documentation and delivery of patient/resident care. I enjoy and thoroughly believe in building others around me through education and setting examples.

## **Education:**

Master's in Science of Nursing Educations, Bethel College, May 2016  
National Honor Society of Nursing (Sigma Theta Tau Member)

## **Skills:**

- Excellent communicator
- Fast learner
- Excellent nursing skill/assessment knowledge
- Enjoy teaching others
- Ability to work autonomously

## **Certifications:**

- Basic Nurse Aide Program Director
- Wound Care Certified
- Infection Prevention Certified
- CPR BLS Instructor
- Tuberculosis Instructor

## **Experience:**

### **Legal Nurse Consultant**

#### **Kosar Legal Nurse Consulting Self-employed**

**Jan 2021 – Present**

- Serving Providers and Attorneys with Expert Nurse Knowledge Specializing in LTC.

### **Adjunct Professor**

#### **Ivy Tech Community College Part-time**

**Aug 2019 – Present**

- Adjunct Professor for Medical/Surgical Clinical in acute care hospital

### **State Of Indiana**

#### **Contracted Infection Preventionist Consultant**

**Jul 2020 – Feb 2021**

- Offered COVID-19 education and consultation to skilled nursing and residential facilities reflective of guidance provided from CDC and State Department of Health

### **Public Health Nurse Surveyor**

**9/26/16 – Jan 2021**

- Work for the ISDH, surveying long-term care facilities and residential facilities to ensure that residents/patients are receiving care and treatment as outlined in the federal and state regulations.

### **Public Health Nurse**

**Sep 2016 – Jul 2020**

- Worked as Public Health Nurse Surveyor for the Long Term Care Division, auditing skilled nursing and residential facilities for compliance with State and Federal regulations.

**8/2015– 8/2016**

**Regional clinical support**

**Trilogy Health Services**

- Oversight of 5 facilities in Northern Indiana to ensure residents/patients were receiving care and treatment as outlined in the federal and state regulations for long-term care and residential. Education and staff training on best practice standards and team building.

**8/2011– 8/2015**

**Director of Nursing**

**Miller's Merry Manor**

- Oversight of nursing department to ensure residents/patients received quality of care, ensure documentation was completed accurately to reflect the care delivered, staffing (hiring, scheduling and education), and quality assurance

**5/2006– 12/2010**

**Staff Nurse**

**Memorial Hospital South Bend**

- Worked on med/surg unit, completed clinical assessments and documentation, medication administration, delegation and oversight of patient care, clinical expertise in nasogastric tubes, trach care, chest tubes, wound care, IV therapy...

# Juliane Wardell



## **Education:**

Master of Arts Degree in Social Gerontology.  
University of the Incarnate Word, San Antonio, TX.

Bachelor of Arts Degree in Psychology with Certificate in Gerontology.  
University of Central Florida, Orlando, FL.

## **Work Experience:**

### **Federal Quality Assurance Independent Contractor**

**April 2021 – Jan 2022**

- Responsible for quality assurance for VA SVH, CLC, DOM and SCI. Write deficiencies using the appropriate regulations per deadlines. Work independently in a demanding environment on multiple teams' meetings and Word documents. Knowledge of travel and receipt reimbursement. Virtual and onsite surveys conducted with minimal supervision. Able to collaborate with a team of professionals and independently.

### **Agency for Health Care Administration Health Facility Evaluator**

**October 2014 - April 2021**

- Responsible for inspecting long term care facilities for compliance with federal and state regulations and writing citations for deficiencies that result in civil money penalties to inspire compliance and improved care of the elderly.

### **Palm Garden of Winter Haven, Winter Haven, FL Activity Coordinator**

**July 2012 - September 2014**

- Responsible for activity programming for 120 bed skilled nursing and rehabilitation facility and to meet the State and Federal Regulation. Budgeting, planning, multitasking in a high turnover environment. Responsible for calendar planning, volunteer recruitment, hiring and firing, completing MDS, Assessments and Care Plans.

### **Harbor Chase of Vero, Vero Beach, FL Director of Memory Care**

**November 2011 - February 2012**

- Responsible for overall well-being and safety of 26 bed assisted Beach living memory care neighborhood. Education, staffing, interacting with families and staff and directing the activity program.

### **Multiple facilities in FL, TX and AZ Activity Coordinator**

**1993 - 2011**

- Developed programs for 180 bed skilled nursing facility and secured dementia unit. Member of leadership team directly responsible for writing and receiving the American Health Care Association Bronze Award in 2010.

KATHRYN HEATH

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**EDUCATION**

*University of Northern Colorado, Greeley, CO*  
Masters of Arts, Gerontology, 2019

*Colorado State University, Fort Collins, CO*  
Bachelors of Applied Human Sciences in Human Development and Family Studies, 2010

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**CERTIFICATIONS**

*Surveyor Minimum Qualifications Test (SMQT) Certification, 2021*

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**PROFESSIONAL EXPERIENCE**

***Program Coordinator, Long Term Care (Columbia, SC) January 2021- Present***

- Participate in unannounced surveys and investigations of certified long-term care facilities. Ensure the facilities are within standards of the federal and state regulations.
- Evaluate the activities to determine the degree to which standards are carried out effectively.
- Identify all conditions that do not meet federal and state regulation standards. Educate and advise facility administrators and staff the reason for the regulations and how and/or why they are out of compliance.
- Advise facility staff administering activities and services not with in regulation guidelines to develop a plan of correction to remedy deficiencies, prevent their reoccurrence, and improve overall quality control and compliance with standards.
- Submit reports of deficiencies and reports of findings as well as required documentation in a timely manner. Ensure written reports are clear, concise, and defensible statements of deficiencies following the guidelines of Principles of Documentation.
- Ensure that all files pertaining to a survey are secured in accordance with HIPAA and in adherence to federal and state laws.
- Meet deadlines on written correspondence, documentation, and data entry.
- Serve as team leader to a survey team when requested and/or on a rotating basis.
- Conduct pre-survey, inspection, and investigation team meetings, reviews of survey findings, entrance and exit interviews, travel arrangements, and directions to survey team when serving as team leader.
- Represent the team as the spokesperson or liaison for surveys when needed.
- Stay up to date with Federal and State Regulations. Understand and communicate, when needed, the federal and state regulations.

***Health Compliance Inspector II, ALR division, State of Colorado (Denver, CO) August 2019 – August 2020***

- Participated in unannounced inspection of licensed and certified facilities to determine whether the facility is operating in compliance with applicable statutes/regulations.
- Knowledge of nursing practices, state and or federal rules, regulations, guidelines, policies and procedures to ensure compliance of health care facilities with state and or federal requirements.
- Educate, advise, and provide guidance to facility administrators and staff regarding the purpose/reason for the regulations, and how and/or why areas are out of compliance.
- Able to deal effectively with conflict and contentious or volatile situations involving the clients or family members of clients as well as the representatives of licensed facilities.
- Understand and communicate the state and federal requirements for: Home and Community Based Services (HCBS) Intellectual Developmental Disabilities (IDD) community programs including: Supported Living Services; Developmental Disabilities Waiver Services and Children's Extensive Services Waiver; Transition Coordination Agencies; Residential Community Facilities (IDD group homes) and Intermediate Care Facilities for persons with intellectual and developmental disabilities.
- Ability to analyze the evidence and survey results in order to determine if and how the health care facility is out of compliance with applicable statutes and regulations.
- Write clear, concise, and legally defensible statements of deficiencies based on analysis of the findings.
- Actively investigate complex complaint allegations, analyzes the data gathered during the investigation, determines whether the allegations of regulatory noncompliance are substantiated and, if substantiated, and determines the appropriate regulatory citations to be issued;
- Using knowledge of the physical conditions and syndromes often occurring with the Intellectual and developmentally disabled (IDD) population and the attendant service and support plans assessed and evaluated health care facility quality of care, services, and treatment of the residents/clients as well as facility practices through observations, record review, as well as interviews with residents/clients, family members, staff, and outside agency and medical professionals.

***Larimer County DHS, Adult Protection CaseWorker II (Fort Collins, CO) Dec 2014 – August 2019***

- Actively participating in the intake process of taking referrals.
- Investigate and assess allegations of abuse, neglect and exploitation to those who are aged, vulnerable or disabled
- Crises intervention
- Assessment of client's strengths and capabilities, case management, advocacy and referrals to other agencies to further support the client.
- When required, will petition to the courts for legal and/or judicial intervention in the best interest of the client. This includes decision making on behalf of the adjudicated client for whom the county department is the legal guardian for.
- Work in collaboration with our community partners including law enforcement, the District Attorney, courts, hospitals, home care providers, Medicaid / Medicare resources, assisted living and nursing facilities.
- Provide resources to the caregivers and families to help with the care of those who are aged, vulnerable or disabled.
- Provide yearly guardianship reports to the courts.
- Facilitate care conferences as needed.

***Larimer County Department of Human Services, The HUB (Fort Collins, CO) Aug 2013 - Dec 2014***

- Receive calls from families and community agencies including law enforcement, long term care facilities, hospitals, and mental health professionals regarding allegations of elder abuse and neglect; gather and document information.
- Act as a liaison between Adult Protective Services and The HUB.
- Train new employees on CAPS and TRAILS systems
- Interview law enforcement, parents, juveniles, and related parties to gather social and family information.
- Receive juveniles picked-up by law enforcement on non-detainable charges or runaway status; contact parents/guardians; assess and coordinate appropriate disposition of juveniles; monitor juveniles pending disposition.
- Receive calls from families and community agencies including law enforcement, school representatives, hospitals, and mental health professionals regarding allegations of child abuse and neglect and youth at risk; gather and document information; assess level of emergency; provide temporary safety plans; make appropriate referrals to in-house child welfare caseworkers or collateral agency services.
- Provide crisis mediation/intervention to de-escalate immediate conflict situations as needed.
- Provide resources to at-risk adults or families with at-risk adults needing assistance.

***Cheyenne Regional Medical Center, Patient Access Trainer (Cheyenne, WY) Oct 2012-Aug 2013***

- Plan and facilitate all training sessions for new employees
- Assist in selecting and interviewing potential employees
- Audit employees work and coach employees that need assistance
- Audit employee's errors and timing in registration.
- Ensure all employees are in compliance with all EPIC training sessions.
- Be available to assist any employee's struggling with registration process using MS4, EPIC and TRACE systems.
- Registers patients and/or responsible party in a timely and efficient manner using multiple methods of communications.
- Executes the pre-registration and pre-authorization process by obtaining necessary documentation from the patient, patient's physician, and insurance company.
- Maintains patient records regarding all non-clinical patient information.
- Executes the pre-registration and pre-authorization process by obtaining necessary documentation from the patient, patient's physician, and insurance company.
- Obtains required admission information such as patient insurance/ financial information, demographics and ensures that an accurate medical record is created.

***Cheyenne Regional Medical Center, Patient Access (Cheyenne, WY) June 2011-Oct 2012***

- Registers patients and/or responsible party in a timely and efficient manner using multiple methods of communications.
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- Executes the pre-registration and pre-authorization process by obtaining necessary documentation from the patient, patient's physician, and insurance company.
- Obtains required admission information such as patient insurance/ financial information, demographics and ensures that an accurate medical record is created.

***Columbine Health Systems, Social Worker (Loveland, CO) January 2010-June 2011***

- Schedule and facilitate care planning conference

- Knowledge in Medicare and Medicaid
- Develop Care Plans for individual residents and update them when needed
- Complete admission, quarterly and annual assessments on all residents
- Ensure all resident's preferences are being honored in a dignified manner
- Ensure that all departments are up-to-date on changes to resident's needs and preferences.
- Maintain constant communication between families, resident and facility
- Educate and guide families on crucial life changing decisions for their loved ones
- Ensure families have knowledge of the guidelines for Medicare and Medicaid
- Assist admissions director in the admission process.

## **Kathleen McDermott, MHA, RN BSN**



Health Care Quality and Regulatory Professional: Regulation, performance/process improvement, medical and nursing per review, medical staff services, mid-level management, case management, and clinical experience totaling 28 years of experience.

### **Education/Licenses**

Certification, CMS SMQT, surveyor ID #38129

Certificate, Legal Nurse Consultant, 2/2015, NCSU, Raleigh, NC

MHA, Health Administration 2/2013, Pfeiffer University, Charlotte, NC

BSN, Nursing 12/2004, Regis University, Denver, CO

ADN, Nursing 5/1993, Arizona Western College, Yuma, AZ

RN, Licensed in North Carolina and New York

CPHQ, National Association for Healthcare Quality Certification, 2010 – 2018

### **Professional Experience**

#### **North Carolina Department of Health and Human Services: Nursing Home Licensure and Recertification, Raleigh, NC**

Nurse Consultant 10/2016 to the present

Perform regulatory activities to determine compliance with state and/or federal

Medicare/Medicaid requirements for healthcare personnel in nursing home facilities;

Investigate nursing home complaints from various sources, including abuse and neglect;

Participate in the IRB (informal review board) process for citation dispute;

Proficient in the use of the CMS web-based ASPEN, ACTS, and LTCSP programs; and

Supervise and team lead recertification surveys.

#### **ALPHA LEGAL NURSE CONSULTING, PLLC, Carthage, NC**

Consulting Firm

Legal Nurse Consultant, 10/2014 to 9/2016

CAPE FEAR MEDICAL CENTER: QUALITY IMPROVEMENT, Fayetteville, NC

760 bed health system

Performance Improvement/Patient Safety Coordinator 9/2013 – 7/2014

- Expert resource for health system performance improvement, patient safety, and regulatory preparedness;



- Maintain compliance with regulations and accreditation standards and monitor compliance;
- Evaluate risk, sentinel events, need for root cause analysis and quality of care
- Medical clinical performance measures for reappointment;
- Resource for risk management for claim evaluation and provision/standard of care; and
- Evaluate patient grievance for quality of care and customer service.

**DUKE REGIONAL HOSPITAL: MEDICAL STAFF SERVICES, Durham, NC**

350 bed acute care hospital, Duke University Health System

Strategic Services Associate/Quality Professional, 8/2008 – 8/2013

- Identify areas for performance improvement for medical, resident, and mid-level staff for all departments;
- Collect and analyze data to identify adverse trends and/or undesirable performance, and systems issue that affect patient care and safety;
- Audit records for quality and compliance standards, prepare and present for accreditations process, and prepare quality data for reappointment; and
- Produce reports, make presentations, and provide training for the peer review process, patient safety, and quality for the Medical Executive Committee.

**OFFICE OF PROFESSIONAL MEDICAL CONDUCT/NY STATE MEDICAL BOARD, Troy, NY**

Project and Department Management/Fellow (Regulation) 3/2005 – 7/2008

- Pilot project for medical malpractice tort reform, policy and procedure development, and determining trends. Presentation to the Commissioner of Health;
- Investigate patient complaints and communicate; evaluate medical and nursing standard of care for all services;
- Interview and provide authoritative guidance to physicians regarding standard of care, strategies for performance improvement and compliance with State law;
- Employ medical experts for quality-of-care determination, patient safety, and expert testimony; referral to other governmental agencies, data gathering and analysis for fact witness to State Medical Board for disposition and adjudication; and
- Data analysis of credentials files, depositions, expert reports, discovery responses, OIG, NPDB, DEA report, claims history, medical malpractice, ABMS, and criminal history.

Management Development Fellowship, NY, School of Public Health 6/2006 – 7/2008

**Clinical Experience From 1993 – 2003:** Intensive care, rehabilitation, and home care.

**Personal:** Own horses and compete



Kathy L. Drake



## Profile

I am a goal-oriented registered nurse seeking a challenging position in which my medical, professional, and practical experience will be fully utilized.

## Experience

CLINICAL NURSE ANALYST, COTIVITI; REMOTE — OCTOBER 2019-JANUARY 2020

This position is responsible for auditing inpatient medical records and generating high quality recoverable claims for the benefit of Cotiviti and our clients. Responsible for performing clinical reviews of medical records and other documentation to evaluate issues of coding and DRG assignment accuracy.

NURSE CONSULTANT, DIVISION OF HEALTH SERVICE REGULATION, NURSING HOME LICENSURE AND CERTIFICATION; RALEIGH, NC — 2007-JUNE 2019

Performed duties related to the licensure and certification of health care facilities, primarily long-term care facilities.

- ▶ Conducted on-site surveys of facilities to determine compliance with State and Federal requirements, including medical chart review, clinical documentation, abstraction, and ensuring medical diagnoses and treatments/medications were reported accurately.
- ▶ Investigated complaints and conducted inspections applying a defined protocol.
- ▶ Involved in significant communication with facility staff, residents, and complainants on a routine basis.
- ▶ Generated reports using various software applications to include the Quality Indicator Survey, a CMS computer-based program.

FIELD-BASED NURSE CHART REVIEWER, MEDASSURANT; ANNAPOLIS, MD — 2007

Accurately and efficiently reviewed medical records and provided comprehensive data analysis and interpretation of medical records in North Carolina.

- ▶ Completed quality, accuracy, and inter-rater reliability testing in a timely manner.
- ▶ Gathered information related to HCC reconciliation and assisted with efforts to maximize documentation and coding standards.
- ▶ Communicated with care provider offices, clinics, hospitals, and other clinical facilities.

OVERSEAS REPRESENTATIVE, INTERNATIONAL MISSION BOARD; RICHMOND, VA — 1996-2007

Contributed in the following ways as an international humanitarian worker:

- ▶ In Central Asia, served as Team Nurse, Assistant to Field Treasurer, and Guest House Manager
- ▶ In Southeast Asia, coordinated annual general meeting for 800+ employees
- ▶ In Western Europe, efficiently ran a dormitory of 28 male teenage boarding students and 4 resident assistants by: creating and fostering a stable environment through interpersonal relationships; maintaining a monthly budget of several thousand Euros; planning and preparing all

meals; maintaining responsibility for medical and dental health of boarding students; and communicating regularly with parents and other staff

WEEKEND CHARGE NURSE, WILDWOOD NURSING LONG-TERM CARE FACILITY; JASPER, GA — 1994-1996

Oversaw staff and served as primary point of contact between patients and physicians.

REGISTERED NURSE, CHEROKEE COUNTY HEALTH DEPARTMENT; WOODSTOCK, GA — 1993

Conducted interviews and medical assessments, provided immunizations, and distributed WIC coupons, in addition to providing education to patients to achieve optimum health.

REGISTERED NURSE, WOODSTOCK HOSPITAL; WOODSTOCK, GA — 1991-1992

Assumed principal responsibility for the total nursing care, assessment, planning, implementation, and evaluation of each assigned patient, and assumed duties of Relief Charge Nurse as needed.

REGISTERED NURSE, NORTH FLORIDA LONG-TERM CARE FACILITY; GAINESVILLE, FL — 1985-1986

Assumed principal responsibility for the total nursing care, assessment, planning, implementation, and evaluation of each assigned patient.

MEDICAL RECORDS TECHNICIAN/CODER, VA MEDICAL CENTER; GAINESVILLE, FL — 1983-1985

- ▶ Reviewed medical record documentation and coded primary and secondary diagnoses and procedures utilizing ICD-9-CM and CPT-4 conventions, sequenced the diagnoses and procedures using coding guidelines, and ensured DRG assignments were accurate.
- ▶ Abstracted and compiled medical data for appropriate optimal reimbursement for the hospital.
- ▶ Ensured quality and quantity of work performed through regular audits.
- ▶ Maintained a thorough understanding of medical record practices, standards, and regulations.

## Education

Santa Fe Community College, Gainesville, FL — Associate Degree of Nursing, 1983

Wake Technical Community College, Raleigh, NC — Completed coursework in Healthcare Billing and Coding I and II

U.S. Career Institute — Certificate in Medical Coding Enhanced Program

Council on Licensure, Enforcement and Regulation - National Certified Investigator and Inspector - Basic Training

## Licensing

Currently multi-state licensed as a Registered Nurse in North Carolina.

## Recognition

2015 Surveyor of the Year - East Division of North Carolina

## References

Provided upon request



## KATIE BRIGHT

MEd, RD, LD

- REGISTERED DIETITIAN
- NUTRITION CONSULT
- KITCHEN SANITATION
- MENU DEVELOPMENT
- POLICY IMPLEMENTATION
- REGULATORY COMPLIANCE



[linkedin.com/in/katherine-bright/](https://www.linkedin.com/in/katherine-bright/)

### ABOUT ME

I am an experienced dietitian in long term care with a demonstrable history of working in geriatrics and acute care settings. I've worked in regulatory services and clinical settings with extensive knowledge of the federal and state regulations, and experience with regulatory compliance in a long term care setting assisting with nutrition services, kitchen sanitation, menu development, policy development and implementation.

### EXPERIENCE

- **03/2021 - Present | Investigator, Health & Human Services - Austin, TX**  
Contracted with Health & Human Services to assist in investigations & other regulatory visits to skilled & long term care facilities funded by Medicare & Medicaid to ensure regulatory compliance.
- **05/2018 - 03/2021 | Assistant Director of Nutrition Services, Daybreak Venture, Austin, TX**  
Regional support for multiple facilities providing medical nutrition therapy, kitchen sanitation oversight, assists with menu development, policy & protocol development & implementation. Also, conducts clinical assessments and provides recommendations for nutrition interventions for at risk patients in acute & long term care rehabilitation.
- **02/2018 - 03/2021 | PRN Registered Dietitian, Traditions Health - Round Rock, TX**  
Provides nutrition consultation to clients and caregivers in a home and facility setting. Provides nutrition counseling and dietary management with nutritional assessments of patients during end of life care.
- **12/2015 -02/2018 | Regional Dietitian, Senior Care Centers – Austin, TX**  
Oversees facility nutrition services, kitchen sanitation, assists with menu development, as well as policy development and implementation. Also, conducts clinical assessments and provides recommendations for nutrition interventions for at risk patients in long term care and rehabilitation.
- **04/2012 - 12/2015 | Investigator VI, Nutritionist, State of Texas Department of Aging & Disability Services – Austin, TX**  
Surveyed and investigated long term care and rehabilitation centers to ensure compliance with the state and federal regulations. Surveyor Minimum Qualifications Test and investigator certified. Worked as a team lead coordinating with registered nurses, social workers and pharmacists to conduct investigations and annual surveys for long-term care and rehabilitation centers funded by Medicare and Medicaid. Reviewed facility food service and dietary practices, menus, infection control, and resident nutritional/hydration statuses.

### EDUCATION

#### The University of Texas at Austin

- Master's Degree - Clinical Exercise Physiology & Nutrition - 3.9 GPA
- Registered Dietitian - Coordinated Program in Dietetics

#### University of Kentucky

- Bachelor's Degree - Biology with a minor in Human Nutrition 3.8 GPA



### ADDITIONAL ACCOMPLISHMENTS

Licensed Dietitian, 2010 – present

University of Kentucky Division I Women's Volleyball team, 2001 – 2004  
Dedicated 25 hours per week in spring and fall for training, practice and team activities

## *Kimberly R. Nichols, MS, RDN, LD*



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### **Professional Summary**

Registered Dietitian with extensive healthcare, consulting and regulatory experience. Strong interpersonal skills with the ability to establish rapport with members of diverse groups to build strong, customer focused teams. Ability to communicate clearly and accurately with both internal and external customers. Detailed oriented with the ability to stay calm under pressure.

### **Experience**

#### **Self Employed | June 2018 – Current**

*Consultant Dietitian*

Currently working as a contractor for Texas Health and Human Services conducting investigations of long-term care facilities. Have provided nutritional care to patients in a variety of post-acute care and hospice settings. Develop and approve menus to meet nutritional standards and special dietary needs of clients. Develop nutrition programs consistent with patient and customer needs. Develop policies and procedures, and work with senior management to implement best practice guidelines. Coordinate education and training programs for new employees.

#### **Bridgemoor Transitional Care (formerly Rapid Recovery Center) | June 2017 – June 2018**

*Regional Registered Dietitian*

Responsible for the dining and nutrition operations of multiple skilled nursing facilities. Develop new menu & dining programs consistent with patient needs, government regulations, and company goals. Develop policies and procedures, and work with senior management to implement best practice guidelines. Provide quality assurance monitoring of menu and nutrition service activities. Provide feedback and corrective action support to ensure successful regulatory inspections. Coordinate equipment and supply orders, Establish staffing patterns and menu programs for new facilities. Hire and train Executive Chefs across multiple facilities.

#### **Daybreak Venture | May 2015 – September 2016**

*Regional Dietitian*

Worked with Administrators, Dietary Managers and Directors of Nursing to provide consistent quality food and nutrition services to five long term care facilities. Coordinated the nutritional care of residents by assessing nutritional needs, implementing appropriate interventions and following up to improve residents' nutritional status. Provided training and mentorship to ensure that staff were knowledgeable on regulations, food safety guidelines and company policies and procedures.

## **Remington Medical Resorts | June 2014 – May 2015**

*Corporate Dietitian*

Developed and implemented policies and procedures to promote the highest quality nutritional care and promote a strong corporate culture for multiple transitional care facilities. Evaluated nutritional status of patients. Developed, implemented, and evaluated nutrition care plans based on patient's needs and expectations, current evidenced based knowledge, and professional experience. Developed training programs for staff on nutrition principles, therapeutic diets, and related subjects. Provided quality assurance monitoring of menu and nutrition service activities. Recruited, trained and participated in the performance evaluations of Executive Chefs. Approved menus for compliance with nutrition standards. Reviewed and updated vendor contracts in order to maximize service and cost effectiveness. Worked with vendors regarding food items, enteral products, supplements, menu planning, and service issues.

## **Senior Care Centers LTC (formerly TRISUN Healthcare)**

**April 2005-December 2010 | June 2012-June 2014**

*Regional Consultant Dietitian*

Worked closely with Administrators, Dietary Managers and Directors of Nursing to provide quality food and nutrition services to five long term care facilities. Participated in the hiring and orienting of contracted dietitians and new dietary managers. Developed and implemented policies and procedures to ensure consistent nutritional care across regional facilities, including implementation of enhanced, resident centered dining program. Coordinated the nutritional care of residents by assessing nutritional needs, implementing appropriate interventions and following up to improve residents' nutritional status. Worked with food vendors regarding enteral products, supplements, menu planning, and service issues. Educated dietary departments on food safety and sanitation guidelines. Acted as a resource regarding state and federal regulations.

## **Education**

Texas State University

Master of Science – Dementia & Aging Studies

The University of Texas at Austin

Coordinated Program in Dietetics

The Ohio State University

Bachelor of Arts – Psychology

## **Accreditation & Professional Affiliations**

Licensed Nursing Facility Administrator, Texas Health and Human Services

Registered with the Commission on Dietetic Registration

Licensed Dietitian, Texas Department of Licensing and Regulation

SMQT Certified

## Kyle E. Culberson



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**Objective:** To secure a contract position that will utilize my expertise and related experience with potential for growth.

### Experience

#### Health Facilities Surveyor

*CertiSurv, LLC., Survey Services*

Dec. 2020 – Current

#### Field Compliance Investigator

*Texas Department of Health & Human Services*

Feb.12 – Current

- Performs independent Surveys or Complaint investigations.
- Participates as a team member or team coordinator utilizing expertise in the area of nursing in inspections, certifications, surveys, and investigations in Mental Health facilities, and Acute Care Hospitals to determine compliance with state and federal laws, regulations, and rules.
- Completes inspection/survey reports listing deficiencies/violations and prepares written reports supporting the action and remedies recommended.
- Communicates on a complex level with others (internally or externally) to provide, exchange, or verify information, answer inquiries, address issues, and resolve problems or complaints.
- Testifies at hearings or in court proceedings to provide information regarding policy/procedures, history, findings, or activities.
- Completes inspection/survey reports listing deficiencies and prepares written reports supporting the actions and remedies recommended.
- Conducts exit conferences with facility staff regarding findings and may assist in developing a plan to correct deficiencies.
- Conducts certification surveys, licensure inspections, or investigations in facilities to determine compliance with federal and state regulations. Performs quality assurance reviews of documents prepared by others for example; publications, assessments, and reports.

#### Field Compliance Surveyor

Feb.11 - Jan. 12

*Texas Department of Aging and Disabilities*

- Participates as a team member or team coordinator utilizing expertise in the area of compliance surveys, inspections, certifications, surveys, and investigations in long-term care facilities (Nursing Facilities, Skilled Nursing Facilities, Assisted Living Facilities, and Day Habilitation and Health Services) to determine compliance with state and federal laws.
- Completes inspection/survey reports listing deficiencies/violations and prepares written reports supporting the action and remedies recommended.
- Utilizes professional expertise and specializes in the following discipline: Social Services.

**Field Compliance Investigator V**

Feb. 06 – Feb. 11

*Texas Department of Licensing & Regulations*

- Investigates alleged violations of laws, rules, regulations and adopted standards
- Determines compliance with program laws, rules, regulations adopt standards
- Conducts background investigations personal history investigations examinations, verify information, and review records
- Evaluate, summarize and document investigative findings
- Assist in preparing cases for presentations or hearings;
- Perform undercover surveillance work regarding suspected violators
- Travel 100% covering (4) four counties. Overseeing 20,000 plus accounts.
- Works under minimal supervision with extensive latitude of initiative and independent judgment

**Police Officer**

June 02 – Jan. 06

*City of Denton, Texas*

- Protect and Serve citizens of the City of Denton.
- Duties as assigned, Investigations, Safety and Accident Scene
- Prepare Court documents, Testify in the court of law

**Education***University of Phoenix**Jan. 2011*

Masters Human Resource Management

*Huron University, Huron, South Dakota**May 1995*

Bachelor of Science, Criminal Justice

**Dakota State University, Madison, South Dakota***May 1994*

Associate of Arts, General Education (Liberal Arts)

**University of Eastern Kentucky - Certified Investigator/Inspector***July 2007*

Wicklender-Zulawski &amp; Associates

**Technical Skills**

Access, Excel, Word, PowerPoint, Internet, SPSS and AS400

**References**

<b>Name</b>	<b>Employer</b>	<b>Title</b>	<b>Phone Number</b>	<b>Email Address</b>
Glen Gowans	Office of Inspector General	Auditor (Retired)	██████ ██████	████████████████████
Sherry Green	State of Texas	Compliance Surveyor	██████ ██████	████████████████████
Tyrone Smoak	Loandepot	Auditor	██████ ██████	████████████████████



# Laura DeWan, R.N., B.S.N., SMQT Certified

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## PROFESSIONAL HISTORY

### HEALTH FACILITY SURVEYOR 2/13-PRESENT

Ascellon Corporation, Landover, MD

- Surveyor for Long Term Care Facilities using LTCSP, QIS and Traditional methods.
- Surveyor for ESRD, Hospice, Hospitals - Limited

### HEALTH FACILITY SURVEYOR 9/10-12/12

State of Kansas

- Surveyor for KS Department on Aging, for Long Term Care facilities

### HOME HEALTH, PER DIEM 12/10-12/12

ResCare Home Care, Overland Park, KS

- Wound care, IVs, injections, insurance assessments

### DIRECTOR OF NURSING SERVICES 5/10-9/10

Golden Living Center Kaw River, Edwardsville, KS

- Direct nursing care for a 50 bed nursing home
- Infection control program management and education
- Wound care program management
- Staffing, education, discipline
- Customer service: company reports and budgeting

### CERTIFIED FOOT CARE NURSE, PER DIEM 12/09-12/12

Plainsmen Health Services, Perry, KS

- Leg and foot assessments, nail cutting, referrals

### HEALTH FACILITY SURVEYOR 8/09-5/10

State of Kansas

- Surveyor in the Department on Aging, for Long Term Care facilities

## EDUCATION/TRAINING

- ISO-9000 Lead Auditor Certified, 2021
- Certified Foot Care Nurse from Wound, Ostomy, Continence Nursing Certification Board, 2006-2013
- Bachelor of Science in Nursing, University of Wisconsin, Eau Claire, 1993

LEA ANN HOWELL, RN, BSN



*Qualifications:*

- **Over 30 years of supervisory and managerial experience**
- **Strong clinical and /medical background**
- **Surgical and Cath lab experience**
- **Highly motivated, organized, efficient and professional**
- **Over 12 years as a Health Facility investigator for the State of Texas for acute facilities.**

*Professional Experience:*

**Texas Health and Human Services-Tyler** April 2010 to Present

- Presently working as Health Facility Investigator- Conducting investigations on different types of facilities such as: Hospital, Critical Access Hospital, Ambulatory Surgical Center, Dialysis Units, Free Standing Emergency Rooms, Birthing Centers, and Abortion clinics. To determine if the facilities are in compliance with the Federal and State licensing rules.

**Palestine Regional Medical Center - Palestine** November 2005 – April 2010

- Surgical Coordinator/ Cath Lab Supervisor/Endoscopy Lab/ Circulator  
Supervised all surgical personnel (Physicians, Anesthesia, and Surgical Staff)

**East Texas Medical Center - Rusk** June 2005 - November 2005 (closed)

- Director of Emergency Room

**University of Texas Medical Branch - Palestine**

- Assistant Nurse Manager - **Beto/Coffield Facility** November - May 2005
  - Assistant Nurse Manager - **Mark Michael Facility** May 2000-March 2001
  - Acting Nurse Manager - **Billy Moore Facility** March 2000 - May 2000
  - Assistant Nurse Manager - **Coffield Facility** December 1998 - March 2000
  - Assistant Nurse Manager - **Mark Michael Facility** May 1998 - December 1998
- Palestine Regional Medical Center - Palestine** March 2001 - May 2005

- Surgical Coordinator/ Cath Lab/Endoscopy Lab /Circulator

**East Texas Medical Center Home Care - Jacksonville** September 1996 - May 1998

- Clinical Director

**Medical Innovations/Physicians Visiting Nurse Service – Palestine**

September 1991 - August 1996

- Branch Manager
- Case Management /Workman's Comp.
- Infusion Therapist / Supervisor I.V. Therapy

**Memorial Hospital, Palestine** November 1982 - September 1991

- Unit Manager / Cath Lab / Emergency Room
- Assistant Director of Nurses
- Supervisor / Surgery Charge Nurse / Charge Nurse Emergency Room

**Mother Francis Hospital, Tyler, Texas** May 1982 - November 1982

- General Medicine and Surgery Floor

**East Texas Medical Center, Tyler, Texas** August 1979 - May 1982

- LVN-Urology Floor

### ***Education:***

**Dallas Baptist University**

- Bachelor of Science of Nursing - December 1989

**Kilgore Jr. College**

- Associated Degree of Applied Sciences - May 1982

**Tyler Jr. College**

- Vocational Nursing - August 1979

**Palestine High School** - May 1974

### ***Certifications:***

- BLS/CPR - Current

**Linda Juma, MSW**

**SUMMARY**

I am skilled in applying laws, regulations, rules, and protocols that have been established by the state or federal government, make decisions in conjunction with interdisciplinary team members or independently, conduct nursing home inspections and complaints investigations. I have passed Surveyor Minimum Qualification Test (SMQT), Quality Indicator survey (QIS) qualification and Long Term Care Survey Process (LTCSP) qualified. I piloted the current immediate Jeopardy protocol with Center for Medicare and Medicaid Services (CMS). I have cited all levels of deficiencies at the Nursing Homes.

**EDUCATION**

I hold a Master degree in Social Work from Fayetteville State University. I also hold a BA degree in sociology with concentration in Social Work (GPA 3.96) from Fayetteville State University, NC (1998).

**WORK EXPERIENCE-**

**Health Facilities Surveyor, CertiSurv, LLC. – September 2020 - Present**

**Facility Compliance Consultant – 2005 until current**

My primary responsibility in Nursing Home Licensure and certification Section is to determine compliance of nursing homes with federal and state requirements through inspections and to conduct complaints investigations in Nursing Homes.

**DIRECTOR OF SOCIAL WORK SERVICES AT CAROLINA HEALTH CARE.**

**Director of Social Work- 2000-2005**

**Work at Carolina Health Care, a 136 – Medicare/ Medicaid beds facility.**

My responsibilities as the Director of Social Services involved assisting residents and their families with personal and environmental difficulties that predispose illness or interfere with obtaining maximum benefits from nursing home care. I helped residents and families through individual or group conferences to understand, accept, and follow medical recommendations. I maintain contact with each family about resident's rights, provide services planned to restore resident histories, resident care plans and reports.

## **DIRECTOR OF SOCIAL WORK, FAYETTEVILLE REHAB CENTER**

**August 1999- April 2000, I was working at Fayetteville Rehabilitation Center as Director of Social Work.**

My duties included day- to- today management of social welfare of clients, completion of minimum data Set (MDS) requirements and assessments on residents, behavior, psychosocial well- being and communication. Other areas included involvement in family counseling updating of Medicare and Medicaid information.

## **ADMISSION DIRECTOR, ELDERLODGE, FAYETTEVILLE, NC**

After graduating in 1998 with a degree in Sociology with a specialization in social work, I was hired as Admission Director at Elder Lodge, nursing home facility in Fayetteville. My assignments included linking the elderly with available services, counseling them and their families, interviewing, and admitting prospective clients to the nursing home. I did shopping for their individual needs and visited with those admitted to areas hospitals.

## **SKILLS**

I have strong clinical background , including assessment, care planning and delivery of care, basic knowledge of state and federal requirements for nursing homes, critical thinking skills , with the ability to gather and analyze data, draw conclusions and use the information to make decisions, intermediate computer skills( windows, flash drive, data management using folders, import and export functions). Effective communication and customer service skills.

Lori L. Anderson RN LLC

## **Employment History and Accomplishments**

### **Federally Contracted Independent Nurse Consultant - Long Term Care. LLC. June 2019- Current**

As a team member, independently contracted with the Federal Veterans Administration to ensure Quality of Care of Federal Community Living Centers, and State Veterans Homes on a national level using Federal Code (38 CFR). Conducted quality of care and quality of life surveys remotely using Microsoft Teams and on-site visits with multi-disciplined team of surveyors. Conducted resident and family interviews, reviewed general environmental conditions, evaluated nursing care practices through observation of care, evaluated complex wound care techniques and infection control policies and procedures through observation, evaluated dining services through observation. Reviewed medical records through a variety of software applications of electronic health records. Reviewed incidents, accidents and sentinel events to identify contributing and causal factors that underlie variations in facility performances using Quality Assurance methods of analysis. Wrote concise survey reports identifying deficient practices.

Independently contracted with a national skilled nursing home provider attaining and maintaining regulatory compliance through consultation, included independent, onsite mock survey and clinical record review, plan of correction adherence to remediate immediate jeopardy situations.

Nurse Consultant  
April 1992-January, 2019 Retired  
State of Wisconsin Division of Quality Assurance  
819 North 6<sup>th</sup> Street Milwaukee, WI 53203

As a team member, conduct complex, onsite program monitoring activities and ensure compliance with Federal (42 CFR) and State regulations (HFS 132) for participation in Medicare and Medicaid programs for long-term care. Gather information to ensure eligibility by conducting interviews, performing quality of life and quality of care assessments, evaluating the facility environment, nursing care, and dietary department. Review a facility's quality assurance program and abuse prevention program. Investigate complaints generated by residents, families, and concerned citizens as to quality of care in long-term care facilities. Generate objective and accurate reports using computerized technology. Communicate survey findings to facility representatives. Participate in consultation and training programs to promote the standards of nursing services, resident care, and treatment in long-term care facilities.

#### **Accomplishments:**

- Qualified surveyor (SMQT) by Federal Department of Health Care Financing Administration (currently known as CMS) Baltimore, MD 1992
- Past member of State of Wisconsin training committee for Longterm care surveyors
- Employee peer advisor and mentor to new employees

- Qualified Mental Retardation Professional (QMRP)

Education

St. Luke's Hospital School of Nursing, Racine, WI. Registered Nurse, Diploma Graduate, 1985.

University of Wisconsin-Parkside, Kenosha, WI. Consortial Nursing Program

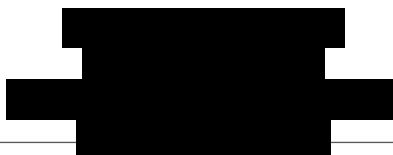
University of Wisconsin-LaCrosse, LaCrosse, WI. Physical Therapy

Basic Life Support Certification American Heart Association, January 2021

Qualifications and Recent Continuing Education

Registered Nurse, State of Wisconsin, #92956

# MARGARET ANDERSON



## EXPERIENCE

JUNE 2017 – CURRENT

**HEALTH COMPLIANCE INSPECTOR**, STATE OF COLORADO

- Responsible for the timely completion of both complaint and recertification surveys for long term care providers.
- During the survey process, interviewing residents in long term care facilities as well as family members, and staff members working in the facility.
- Documenting the findings of those surveys so that providers can respond, in a clearly and concise format.

MARCH 2010 – JUNE 2017

**ASSISTANT RECREATION DIRECTOR**, LIFECARE OF LONGMONT

- Completion of assessments, both initial and continuing, on all residents in the facility.
- Interviewing resident and family members to ensure their recreation needs were met.
- Completion of care plans and treatment plans for all residents in the facility.
- Documenting on a regular basis residents written treatment plans, to determine if changes in the recreation treatment needed to be addressed.

APRIL 2005 – MAY 2008

**LIFE ENRICHMENT COORDINATOR**, BROOKDALE SENIOR LIVING

- Completion of assessments, both initial and continuing, on all residents in the facility.
- Planned and implemented the recreation programs for the residents residing in the facility.
- Interviewing resident and family members on a regular basis to ensure their care needs were being met by facility staff.
- Worked closely with senior programs in the community to share resources.
- Completion of care plans and treatment plans for all residents in the facility.
- Documenting on a regular basis residents written treatment plans, to determine if changes in the recreation treatment needed to be addressed.

## EDUCATION

DECEMBER 2016

**BS-HUMAN SERVICES**, METROPOLITAN STATE COLLEGE OF DENVER

## SKILLS

- More than 15 years' experience working with the elderly and disabled individuals.
- Excellent communication skills, not only with staff but also residents and families members in a long term care health setting.

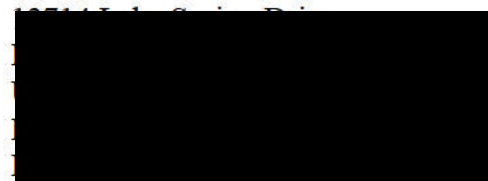


- Well versed in a variety of medical and mental health disorders and treatment through work experience in skilled nursing homes.
- Highly organized, diligent and responsible.
- Proficient computer literacy proven through work experience in a variety of computer programs.

## Marilyn Carter Klotz

March, 2022

Marilyn Carter Klotz



### Work Experience

#### **Office of the Inspector General-Nurse Consultant/Inspector December 2019- current**

The Division of Health Care is responsible for inspecting, monitoring, licensing and certifying all health care facilities as defined by KRS 216.510(1). The division also is responsible for investigating complaints against health care facilities; facility plans review and developing regulations.

**Ascellon Corporation October 2010-2019** Nurse Surveyor- Conduct surveys in long-term care facilities to assess performance in the interpretation, application and enforcement of government requirements and conduct follow-up/revisits, complaints or special investigations and conduct crisis reviews affecting residents of medical facilities. The responsibility of the Health Surveyor is to act as the focal point for consistent application of methods, data collection and reporting during the onsite survey.

- Coordinating the surveillance and regulation of health care providers to ensure that care provided meets professional standards of practice and complies with State and Federal regulations.
- Visiting medical facilities around the country to perform the surveys and report findings to the Maryland location.
- Participate in the investigation of complaints and incidents concerning facilities or individuals; routine surveillance activities.
- Preparation of clear and concise reports regarding survey findings.
- May participate in special projects including assisting with developing, writing, and testing of the survey process and providing recommendations for improvement.
- Participating in peer reviews

#### **Office of the Inspector General**

Nurse Consultant/Inspector

November 2009- 2010

The Division of Health Care is responsible for inspecting, monitoring, licensing and certifying all health care facilities as defined by KRS 216.510(1). The division also is responsible for investigating complaints against health care facilities; facility plans review and developing regulations.

**Jewish Hospital**

Certified Wound, Ostomy, and Continence Clinician

January 2008- November 2009

I was responsible for the assessment, treatment, and follow up of patients with various wounds, and ostomies in the outpatient setting.

**Saint Joseph Healthcare**

Certified Wound, Ostomy, and Continence Clinician

2003-2007

I was responsible for managing conditions such as stomas, draining wound, fistulas, vascular ulcer, pressure ulcers, neuropathic wounds, urinary incontinence and diversions, fecal incontinence, and functional disorders of the bowel and bladder. I worked collaboratively with physicians and nursing staff in providing state of the art wound, ostomy and continence care. My team conducted quarterly prevalence and incidence study data related to the development of pressure ulcers. This data was disseminated in an interpretative report presented to the VP of Nursing, management staff, and team members. We worked collaboratively with the health care team to decrease the incidence of pressure wounds. This program was, and still is very successful in the inpatient setting.

**Saint Joseph Healthcare**

Case Management, Department Manager

2001-2002

In collaboration with the VP of Performance Improvement, I was responsible for developing programs for the medical team related to appropriateness of resource utilization, and quality of care issues. I assisted to coordinate the case management department in providing high quality case management and social services. I worked closely with the business office regarding reimbursement, denial process and relations with all payer groups.

**Saint Joseph Healthcare**

2000-2001

Nurse Case Manager

I was responsible for early identification of high risk patient populations with implementation of the discharge process upon admission to the acute care setting. This process involved equal collaboration with the patient, family, and members of the healthcare team to ensure ongoing, comprehensive, coordinated, and individualized medical care and discharge planning. My area of expertise was the ICU, and transitional care settings.

**Saint Joseph Healthcare**

1999-2000

Medical/Surgical Float Pool Nurse

I was responsible for direct patient care in the medical, surgical, cancer, and neurological units. This position required flexibility, and adaptability to changing situations, as well as a broad knowledge base of various medical diagnosis and nursing interventions. I frequently directed nursing graduates and nursing interns.

Saint Joseph Healthcare

1991-1998

Charge Nurse/Medical Unit

I was responsible for charge nurse duties which included; problem solving, delegation of staff, patient care assignment based on acuity and staff experience, and computer data entry. I provided direct patient care of the medical patient with an emphasis on infectious disease, diabetes, and renal failure.

**Midway College of Nursing**

1993-1996

Clinical Nurse Instructor/Clinical Laboratory Instructor

I was responsible to direct, supervise, mentor and evaluate nursing students at all levels of the nursing school experience. I instructed students in the medical, surgical, cardiac, and psychiatric rotations. I also instructed and evaluated nursing students on clinical skills and methodology in the laboratory setting on campus.

**Saint Joseph Healthcare**

1987-1991

Clinical Nurse Manager

My responsibilities included staffing a busy forty bed surgical unit, staff evaluations, problem solving, patient and staff education, and direct patient care. I served frequently as a preceptor to new nursing graduates.

**Charter Ridge Hospital**

1987-1988

Primary Care Nurse

I provided counseling and medical care to the adolescent requiring acute psychiatric hospitalization. I was responsible to formulate an individualized treatment plan in collaboration with the patient and caregiver. Ongoing monitoring of a therapeutic environment was essential in this type of acute setting.

**Saint Joseph Healthcare**

1986-1987

Staff Nurse

I was responsible in providing direct patient care of the cardiac and surgical patient requiring telemetry monitoring. I was trained in the interventions related to the emergent administration of cardiac drugs.

**Woodford Memorial Hospital**

1983-1986

Staff Nurse

I provided patient care as a novice nurse in various areas of nursing under the direct supervision of the experienced nurse. Areas of nursing were targeted to the medical/surgical client, the obstetrical client and the emergency room client.

**Education**

Emory University

Wound, Ostomy, and Continence Program, 2004

Passed, and certified

Midway College of Nursing

BSN, 1993

Magna Cum Laude

Eastern Kentucky University

ADN, 1983

Skills- Wound, and Ostomy Nurse, Certified Nurse Consultant Surveyor, typing skills, and computer skills. (Word, Outlook, Excel)

Mary A. Maas

Work Experience

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**CertiSurv, LLC.**  
**12/2019 – Current**  
**Health Facilities Surveyor**  
Survey Services, Columbia, TN 38401

**North Carolina Department of Health and Human Services**  
**Division of Health Service Regulation, Raleigh, NC 27699 United States**

**01/2006 – Retirement 02/01/2019**  
**Hours per week: 40**  
**RAI Clinical Coordinator**

**Duties, Accomplishments and Related Skills:**

- Maintained the Minimum Data Set (MDS) Databases and ASPEN Central Office Database.
- Designed and implemented training presentations for providers and surveyors in the MDS assessment process and answered questions from providers on the clinical interpretation of the assessment instruments and program requirements.
- Analyzed data and monitored reports to identify potential error rates.
- Made compliance determinations, applying laws, regulations, standards and procedures that have been established by the Federal government,
- Member or Chairperson for the CMS/AHFSA RAI Panel, responded to questions from other state RAI Coordinators across the nation.
- Conducted surveys in nursing homes to determine compliance with federal and state requirements using the new Long Term Care Survey Process
- Member of the Quality Improvement Committee for the Long Term Care Section, reviewing findings from staff to validate deficient practice and ensure citations are written according to Principles of Documentation
- Interpreted regulations, answered questions and responded to survey issues and complaints concerning the care and services received by residents
- Participated in the determination of immediate jeopardy with surveyors in the field and in the office.

**NC Division of Health Service Regulation, Raleigh, NC 27699 United States**  
**04/2004 - 01/2006 as Team Leader / Facility Survey Consultant II**  
**01/2000 – 01/2004 as Nursing Home Facility Survey Consultant I**

**Rex Home Service, Raleigh, NC 27607 United States**  
**10/1997 - 06/1998**

**Anoka Metro-Regional Treatment Center, Anoka, MN 55303 United States**  
**04/1989 - 07/1997**

**Hennepin Technical College, Eden Prairie, MN 55347 United States**  
**09/1983 - 02/1993**

**Crystal Lake Health Care Center, Robbinsdale, MN 55422 United States**  
**09/1979 - 06/1985**

**Lutheran Home for the Aged, Belle Plaine, MN 56011 United States**  
**06/1975 - 05/1977**

Education:

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**University of Minnesota School of Nursing Minneapolis, MN**  
Master's Degree 10/1994 **Major:** Nursing **Minor:** Educational Psychology

**College of St Francis Joliet, IL**  
Bachelor's Degree 08/1992 **Major:** Health Arts

**College of St Catherine - St Mary's Campus Saint Paul, MN**  
Associate's Degree 05/1975 **Major:** Nursing

Job Related Training:

Affiliations and Additional Information:

Surveyor Minimum Qualification Test completed June 2000  
National Certified Investigator Training - Specialized Program Sept. 2003  
NC Certified Public Manager completed Oct. 2010  
Quality Indicator Surveyor completed Dec. 2011  
AANAC RAC-CT 3.0  
NC LeadershipDHHS class of 2013-2014 completed May 2014  
New Long Term Care Survey Process completed Nov. 2017

Sigma Theta Tau - Nursing Honor Society - Zeta Chapter  
RAI Panel - member since 2007  
DHSR Employee of the Year 2012  
Workgroup Member and contributor- new CMS Preceptor Manual

# MELANIE BRADFORD

## PROFESSIONAL SUMMARY:

Organized Registered Nurse bringing strengths in handling work independently and solving routine problems without oversight. Offers expertise in ASE-Q and SMQT certified and the ability to quickly learn new processes.

## SKILLS:

- Customer Service
- Leadership Skills
- Adaptable
- Organization
- Teamwork Skills
- Collaboration
- Flexible

## EXPERIENCE:

*RN Surveyor*

*Jul 2017 - Current*

*Department of Human Services*

*Little Rock, Ark*

Visit and investigate complaints regarding abuse, neglect, quality of care, and quality of treatment to residents in a Long Term Healthcare setting, annually and on an as needed basis, to ensure facilities are in compliance with CMS regulations regarding Medicare and Medicaid funding. Written reports per CMS guidelines with deficiencies written when facilities are non-compliant with regulations. Must have and build a rapport with facilities and staff to ensure residents receive the upmost care and safety. Learning and educating on a daily basis. Works alone or with others to ensure the assignment is completed when due. State wide travel with overnight stays and weekends as needed.

*Weekend RN Supervisor*

*Nov 2016 - Jun 2017*

*St. Andrew's Place*

*Conway, Ark*

I worked as the Weekend RN Supervisor for 8 hours a day, then I would take the medication cart for 4 hours, and was also the treatment nurse for 4 hours, for a total of 16 hours and then some per day. I also stood in for the DON on several occasions during the week while she was away. I was responsible for Admissions, Discharges, assessments of residents, ensuring state and federal regulations as well as facility policies and procedures were followed, to ensure the safety of residents/family/ and staff. Notifying physicians, families, of residents change in conditions and following through with new orders, ensure care plans were updated, medications were given, treatments were performed. I supervised and was held accountable for all care provided by licensed and non-licensed staff. Education to residents/families/staff. Staff were disciplined as needed, with write ups or sent home. In-services were conducted with staff when anything new arose and sometimes just to refresh our memory on things we already knew, but just needed a reminder.

*Case Manager*

*Apr 2015 - Oct 2016*

*Arkansas Hospice*

*Conway , Ark*

Job duties included but not limited to assessment of patient, family, and home, education of medications, equipment, and disease process, building a plan of care for each case, ensuring constant monitoring and interventions, and evaluating and changing the plan of care to ensure all patient and families needs were being met, including collaboration with interdisciplinary teams. Supervised CNA's to ensure care for patients were implemented according to the professional standards of nursing care and to the plan of care as devised by the patient and family. I ordered medications for the patient/family, filled weekly pill packs, made weekly visits to assess each patient, sometimes visits were made 2-3 times a week, depending on patient condition. I pronounced a patient death. I also documented and submitted the death certificate on ERAVE.

*LPN/Charge Nurse*

*Jun 2009 - Dec 2014*

*Indian Rock Village, LLC*

*Fairfield Bay, Ark*

Provide and promote patient and staff safety, medication and procedure administration as ordered by physicians, therapists, assessing and monitoring patient physical and mental health and notifying physicians and family of changes, new admissions, discharges, body audits, postmortem care and notification to appropriately authorities, responsible for incident and accident reports, obtaining orders and following through with orders, treatments, medications, etc....daily behavior charting, charting by exception via computer. Supervise CNA's and teaching and educating as needed to provide residents with the care and safety as per State and Federal Guidelines. Staff were disciplines as needed, per verbal, written notice.

*Certified Nursing Assistant*

*Dec 1998 - Jun 2008*

*Good Samaritan Indian Rock Village*

*Fairfield Bay, Ark*

Provide and assure patient safety, assist patient with personal care and everyday activities, encourage patient independence, assist Charge Nurse with patient procedures, notify Charge Nurse of any changes in patient status, use of various mechanical lifts, obtain vital signs, chart appropriately via computer, answer phones.

## **EDUCATION:**

*Associates Degree : Registered Nurse*

*Dec 2014*

*Ozarka College*

*Melbourne, Ark*

*Associate Degree : Licensed Practical Nursing*

*Aug 2009*

*Ozarka College*

*Mt. View , Ark*



# MELISSA A. MROTEK



## PROFESSIONAL SUMMARY

Client-focused Social Services Director with background in managing social work programs and highly educated in laws relating to welfare and crisis intervention. Determined employee with 19 years of experience leading highly effective and talented teams. Maintains composure, diplomacy and efficiency in all situations.

Proven leader with the ability to manage multiple projects and ensure completion under time and resource budgets. Exceptional skills include communication, organizational, and leadership. Bilingual in English and Spanish.

## SKILLS

- Onsite facility tours
- Written and verbal communication
- Client needs assessments
- Proficient in MS Office
- Interviewing skills
- Multitasking abilities
- Conflict resolution
- Teamwork
- Leadership
- Compassion
- Flexible & Adaptable
- Computer proficiency
- Reading comprehension

## EDUCATION

### Home Health

Mansfield, Texas • 2011

### *Sales and Marketing Training*

### Roth Medical Durable

### Medical Equipment Company

Dallas, Texas • 2008

## WORK HISTORY

### **Minnequa Medcenter - Director of Social Services**

*Pueblo, CO • 04/2020 - Current*

- Coordinated care between physicians and patients by overseeing all stages of patient relations from admissions through long-term care programs.
- Referral sources included: Family, Hospital Discharge planners, Department of Human Services, Veteran Service offices, Colorado Mental Health Institute Pueblo, Skilled Nursing Homes.
- Established preliminary and comprehensive assessment for social service needs of consumers.
- Referred clients to appropriate team members, community agencies and organizations to meet treatment needs.
- Created staff work assignments and monitored activity for efficient follow through.
- Constructed short- and long-term planning to improve client programs.
- Collaborated with department managers to correct and improve services.
- Referred families to shelters, legal resources and educational programs.
- Participated in resident care plans, completing necessary paperwork to include: social history, health history, psychological history, advanced directives, living

### ***Medical Sales Training***

### **El Pomar Leadership Training**

Pueblo, CO • 05/2004

### ***Pueblo Graduate***

### **Colorado State University**

Pueblo, Colorado • 1997

### ***Bachelors Degree: Social***

Work, Spanish

## **CERTIFICATIONS**

- Certified SMQT, 06/2014

wills and progress notes in resident charts.

- Prepared and submitted application Medicaid applications, Medicare applications, contacted other agencies when necessary regarding resident rights, hospice care.
- Facilitated discharge when appropriate: Home health care agency, HCBS, primary care physician.

### **Belmont Lodge - Director of Admissions**

*Pueblo, CO • 10/2019 - 04/2020*

- Served as primary contact for coordination of application screening and tracking, visit and interview arrangement and marketing communications.
- Referral sources included: Family, Hospital Discharge planners, Department of Human Services, Veteran Service offices, Colorado Mental Health Institute Pueblo, Skilled Nursing Homes. Increased census by 20%.
- Communicated effectively with internal and external stakeholders by planning and executing displays at medical expositions.
- Maintained daily census by proactively updating facility waiting list.
- Worked with marketing team to develop recruitment strategies in accordance with organizational goals and within budgetary guidelines.
- Devised and implemented strategic recruitment plan with consideration to both long and short term goals.

### **Colorado Dept. Of Public Health And Environment - Long Term Care Compliance Inspector**

*Pueblo, CO • 09/2013 - 09/2019*

- Inspected long term care facilities to determine compliance with state and/or federal regulations.
- Determined if care provided at health facilities and agencies met evidence based practice, professional standards and regulatory requirements.
- Conducted observations of care provided; Interviewed consumers, family members, medical professionals and other staff about care and services.
- Reviewed medical records and interdisciplinary care plans to ensure completeness based on physical, psychosocial, cultural, and spiritual needs of consumer.
- Wrote reports detailing areas of non-compliance with

professional standards and federal and/or state regulations based on investigative results.

- Explained investigative findings to facility/agency staff and members of public.
- Enforced compliance with complex state and federal laws, rules and regulations for industry.
- Created plans and communicated deadlines to ensure surveys were completed on time

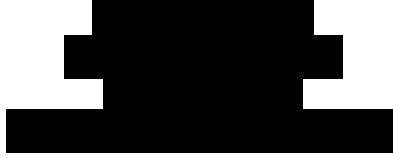
## **AFFILIATIONS**

Advisory Council Member, El Pomar Emerging Leadership Development Co-Coordinator, Latino Advisory Committee, Pueblo Colorado, El Pomar Milton E. Proby Selection Committee Member,.

Alzheimer's Association Volunteer Committee Member, Memories in the Making and Memory walk.

Marine Corps League Detachment Volunteer, Home of Hero's Toy Drive.

## MELISSA K. SLAUGHTER



### **OBJECTIVE**

Registered Nurse dedicated to “improving the quality of life by protecting the vulnerable, fostering independence, and promoting better health” for those residing in skilled nursing facilities. Proficient in working under stressful situations and offering services to aging patients. Strong delegation, teaching and leadership skills with excellent verbal and written communication.

### **PROFILE**

- 9 years experience in nursing home, home health care, hospital, and clinic settings
- Self-motivated to deliver quality health care using proven therapies to treat patients
- Familiar with various assessment techniques, evaluation of symptoms for chronic diseases, and implementation of correct treatment plan
- Methodical in continuing education and dedicated to patient safety
- Well-organized and open-minded in developing efficient patient-centered care

### **EDUCATION**

University of Arkansas at Little Rock, Little Rock, AR  
Bachelor of Science in Nursing  
May 2016

University of Arkansas at Little Rock, Little Rock, AR  
Associate of Applied Science in Nursing  
May 2014

Tulsa Community College, Tulsa, OK  
Associate in Arts in Psychology  
May 2013

National Council Licensure Examination for Registered Nurses, May 2014  
National Council Licensure Examination for Licensed Practical Nurses, January 2012

Tri County Technology Center, Bartlesville, OK  
Practical Nursing Diploma  
December 2011

### **RELATED EXPERIENCE**

*CertiSurv, LLC. Columbia, TN*  
Health Facilities Surveyor  
January 2021 - Current

*Arkansas Department of Human Services – Office of Long-Term Care, Little Rock, AR*  
Registered Nurse – Nurse Manager/Training Coordinator/RAI Coordinator

November 2020 – Current

- Creates, implements, and ensures completion of training plan prior to the trainee sitting for the national certification of the Surveyor Minimum Qualifications Test
- Trains Office of Long-Term Care staff, nursing home staff and the public on MDS 3.0, federal regulations, the Long Term Care Survey Process (LTCSP), and other related matters.
- Conduct hiring process for survey personnel; Complete evaluations for staff supervised according to DHS policy; confronts non-performance issues and applies disciplinary policy as necessary; act as liason between OLTC and other program areas and agencies, and conduct special projects as assigned

*Arkansas Department of Human Services – Office of Long-Term Care, Little Rock, AR*  
Registered Nurse – Nurse Coordinator

February 2020 – November 2020

- Creates, implements, and ensures completion of training plan prior to the trainee sitting for the national certification of the Surveyor Minimum Qualifications Test
- Prepares and presents verbal and written information and reports
- Maintains nursing staff accountabilities by coaching, counseling and disciplining employees; planning, monitoring and appraising job results

*Arkansas Department of Human Services – Office of Long-Term Care, Little Rock, AR*  
Registered Nurse – Nurse Supervisor

November 2019 – February 2020

- Prepared and presented verbal and written information and reports
- Provided regular performance feedback
- Assisted staff in following guidelines outlined by CMS
- Maintained nursing staff accountabilities by coaching, counseling and disciplining employees; planning, monitoring and appraising job results

*Arkansas Department of Human Services – Office of Long-Term Care, Little Rock, AR*  
Registered Nurse – Surveyor

May 2016 – November 2019

- Assist registered nurses and health facility surveyors by teaching and implementing the new computerized Long-Term Care Survey Process
- Team Coordinator responsible for supervising approximately 3-5 nursing staff during on-site survey and certification reviews of long term care facilities
- Gather information through observations, record reviews, and interviews to evaluate facility compliance with Federal/State regulations
- Complete Information Analysis and Deficiency Statements

*Elite Home Health, Eureka Springs, AR*

Registered Nurse – Field Supervisor

February 2016 – May 2016

- Completed admission assessments and discharges, as well as provided education to patients and their families regarding disease process
- Coordinated care with Certified Nursing Assistants, Occupational Therapists, Physical Therapists, and Physicians
- Supervised and provided hands-on teaching to Certified Nursing Assistants and Licensed Practical Nurses

*Mercy Gastroenterology Clinic, Rogers, AR*

Registered Nurse

August 2014 – February 2016

- Provided professional nursing care to clinic patients under the supervision of a physician and clinic manager
- Assessed patients' general condition and ensured needs were met
- Assisted physician with examinations, diagnostic procedures, and treatments

*Callaway Nursing Home, Sulphur, OK*

Licensed Practical Nurse – Charge Nurse

February 2012 – May 2013

- Supervised and delegated tasks to a team of 7 nursing professionals by complying with the facilities policies for residents in a long term care setting
- Recorded detailed report of care given to approximately 40 residents per shift
- Delivered direct care according to therapeutic plan, including wound care and behavior modifications
- Assisted with educating staff with in-services regarding standards of practice in a nursing home setting

*Interim Healthcare, Bartlesville, OK*

Certified Nurse Assistant – Home Health

May 2008 – February 2012

- Reviewed and followed care plan
- Assisted with self-administered medication
- Documented client's condition

*Jane Phillips Medical Center, Bartlesville, OK*

Certified Nurse Assistant – Med/Surg

March 2008 – November 2008

- Assisted with Activities of Daily Living
- Applied telemetry when needed
- Collected laboratory specimens and prepared them for testing

## **HONORS AND AWARDS**

- Dean's Honor Roll 2015 University of Arkansas at Little Rock
- President's Honor Roll 2008-2012 Tulsa Community College
- Honor Roll 2011 Tri County Technology Center

Miranda Kaye Nixon

***Professional  
Experience***

***Health Facilities Surveyor, CertiSurv, LLC.  
Columbia, Tennessee  
September 2019 to present***

Conduct surveys of Long-Term Care (LTC) and Assisted Living facilities to determine compliance with state and federal requirements. The primary duties are to conduct inspections and to investigate complaints applying a defined protocol. Write up reports using principles of documentation guidelines and various software applications. I am Survey Minimum Qualifications Test (SMQT) certified and Quality Indicator Survey (QIS) certified. I have experience conducting traditional, QIS, LTCSP, initial, infection control, complaints, and revisit surveys.

***Facility Surveyor Consultant, North Carolina Department of Health and Human Services, Division of Health Service Regulation  
Raleigh, North Carolina  
May 2003 to August 2020***

Conduct surveys of facilities to determine compliance with state and federal requirements. The primary duties are to conduct inspections and to investigate complaints applying a defined protocol. Write up reports using principles of documentation guidelines and various software applications. Assist in providing training to new staff in dietary and the survey process. Supervised 5 surveyors. I am Survey Minimum Qualifications Test (SMQT) certified and Quality Indicator Survey (QIS) certified. I have experience conducting traditional, QIS, LTCSP, complaints and revisit surveys.

***Nutrition Consultant, North Carolina Department of Health and Human Services, Division of Public Health  
Raleigh, North Carolina  
March 1996 to May 2003***

Provided technical assistance, training and monitoring to 140 Child Care Centers and Adult Day Care Centers across the State of North Carolina. Training was conducted face to face and via teleconference. I also assisted in providing training to Directors on filing claim for

reimbursement electronically. Approve application packets, provide nutrition education, menu planning, and record keeping training to sponsors. Conducted administrative reviews on Day Care Centers and Adult Day Care Centers to ensure federal dollars are spent on nutritious foods and other allowable expenses. Interpret and follow federal regulations. Analyzed federal regulations and provided recommendations on proposed legislation. Worked closely with the Division of Child Development and Social Services. Assisted in the development of policy memos. Assisted in development of outreach materials and Child and Adult Care Food Program required forms and a host of other related duties to include the Inspection of food storage and preparation areas.

***Nutrition Consultant, North Carolina Department of Public  
Instructions***

**Raleigh, North Carolina**

**March 1994 to March 1996**

Responsible for co-management of a \$4 million child nutrition program of USDA's Summer Food Service program in North Carolina, through coordination with regional consultants and supervision of over 100 sponsor organizations. Approved application packets: provide nutrition education, menu planning, and record keeping training to sponsors. Provided technical assistance and training to nine counties participating in the Child and Adult Care Food program. Assisted in the development of policy memos. Developed and prepared outreach materials. Developed and organized the annual plan for the Summer Food Service Program. Supervise 3 – staff during the Summer months.

***Food Activity Manager, Army and Air Force Exchange Services***

***RAF Upper Heyford, United Kingdom***

**April 1988 to December 1993**

This job included: managing a food facility that grossed \$45,000.00 - \$60,000.00 a month, hiring employees, counseling employees, training employees, organizing work schedules, procuring merchandise, performing monthly inventory, reconciling paperwork daily, to include bank deposits, supervising employees in the kitchen and dining areas, ensuring compliance with fire safety, sanitary and security regulations.



***Food Activity Manager, Army and Air Force Exchange Services  
Moody AFB, Valdosta, Georgia  
December 1981 to February 1988***

Planned and supervised the preparation and sale of food items in a cafeteria type operation. Received and checked the quantity, quality, and condition of direct delivery food and supply items. Maintained and analyzed cost records. Prepared daily reports and annual budgets. Ensured compliance with fire safety, sanitation, and security regulations. Initiated work orders for facility and equipment repairs. Ensured the security of cash, fixed assets, and merchandise inventory. Performed marketing efforts. Established work schedules, counseled employees, prepared performance reviews and train employees. Maintained proficiency in knowledge of all applicable regulations. Created and enhanced advertisement promotion to increase sales

***Food Activity Manager Trainee, Army and Air Force Exchange Services  
Fort Sam Houston, San Antonio, Texas  
August 1981 to December 1981***

Attended a 5-month training program to become a proficient Food Activity Manager. This 5-month training program included classroom and on the job hands on training. After successful completion of the training program, I received my first assignment as Food Activity Manager at Moody Air Force Base in Valdosta, Georgia.

**Education**

**South Carolina State University, B. S. Food and Nutrition, 1981  
Claflin College, June 1977 to August 1977  
Orangeburg-Wilkinson High School, HS Diploma, 1977**

# M... CA BURNHAM



## PROFESSIONAL SUMMARY

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Versatile Investigator with a Registered Nurse license and successful Long Term Care and Intermediate Care facilities history. Effective at working with multiple various disciplines, government agencies and private companies to complete successful investigations and surveys.

## SKILLS

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- Ethical and honest
- RN
- SMQT
- QIDP
- Infection Control Measures
- Triaging
- Aspen Programs
- Tulip Program
- Team Leader experience and effective Team member

## WORK HISTORY

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7/15/20 to 03/2021

### **Investigator VII**

**Texas Health And Human Services** – Austin, Texas

Conducted licensure inspections, certification surveys and investigations using applicable protocols, state and federal regulations and procedures(as set forth in the State Operations Manual).

Prepared descriptive and comprehensive reports.

Made recommendations for appropriate actions, and communicated findings to team members, facility administrators, medical directors, program managers and guardians as appropriate.

As an RN/SMQT determined whether facilities provided effective and high quality care. And whether individuals received appropriate care according to their diagnoses in a timely manner.

Conducted investigations into complaints and incidents to determine appropriateness of facility response, healthcare and programming. When injuries were involves in the allegations, assessed individuals and documented findings.

Assisted with training new surveyors on the survey and investigation process, reviewed their work to ensure documentation met the required Principles in Documentation.

03/2017 to 07/2020

### **Investigator VI**

**Texas Health And Human Services** – Austin , Texas

Conducted licensure inspections, certification surveys and investigations using applicable protocols, state and federal regulations and procedures(as set forth in the State Operations Manual).

Prepared descriptive and comprehensive reports.

Made recommendations for appropriate actions, and communicated findings to team members, facility administrators, medical directors, program managers and guardians as appropriate.

As an RN/SMQT determined whether facilities provided effective and high quality care. And whether individuals received appropriate care according to their diagnoses in a timely manner.

Conducted investigations into complaints and incidents to determine appropriateness of facility response, healthcare and programming. When injuries were involves in the allegations, assessed individuals and documented findings.

Assisted with training new surveyors on the survey and investigation process, reviewed their work to ensure documentation met the required Principles in Documentation.

02/2016 to 03/2017 **Utilization Review Nurse**

**Texas Health And Human Services – Austin, TX**

Reviewed and evaluated random sample individuals records related to waiver program enrollment under title XIX and XX.

Assessed individuals in person to evaluate the appropriateness and cost effectiveness of the wavier services they received. Extensive review of their medical records, provider assessments and service plans which were used to make service authorization decisions and recommendations.

07/2011 to 02/2016 **RN Surveyor/Investigator**

**Texas Department Of Aging And Disability Services – Austin, TX**

For the Intermediate Care Facilities

Conducted licensure inspections, certification surveys and investigations using applicable protocols, state and federal regulations and procedures(as set forth in the State Operations Manual).

Prepared descriptive and comprehensive reports.

Made recommendations for appropriate actions, and communicated findings to team members, facility administrators, medical directors, program managers and guardians as appropriate.

**As an RN/QIDP (Qualified Intellectual Disability Professional)** determined whether facilities provided effective and high quality care. And whether individuals received appropriate care according to their diagnoses in a timely manner.

Conducted investigations into complaints and incidents to determine appropriateness of facility response, healthcare and programming. When injuries were involves in the

allegations, assessed individuals and documented findings.

Assisted with training new surveyors on the survey and investigation process, reviewed their work to ensure documentation met the required Principles in Documentation.

10/2009 to 07/2011 **Quality Assurance Monitoring Specialist**

**Texas Department Of Aging And Disability Services** – Austin, Texas

Reviewed intakes which included incidents and complaints of abuse, neglect, exploitation and complaints of agencies failure to comply with state and federal regulations. Triaged intakes to determine priority and ensure that areas of non compliance were addressed in allegations. Ensuring that allegations issued by the intake specialist were accurate issues identified in the provider regulations specific for each program.

Reviewed provider investigation reports for incidents prioritized as professional reviewable.

06/2001 to 10/2009 **RN Surveyor/Investigator**

**Texas Department Of Aging And Disability Services** – Austin, Texas

For Intermediate Care Facilities

Conducted licensure inspections, certification surveys and investigations using applicable protocols, state and federal regulations and procedures(as set forth in the State Operations Manual).

Prepared descriptive and comprehensive reports.

Made recommendations for appropriate actions, and communicated findings to team members, facility administrators, medical directors, program managers and guardians as appropriate.

As an RN/QIDP determined whether facilities provided effective and high quality care. And whether individuals received appropriate care according to their diagnoses in a timely manner.

Conducted investigations into complaints and incidents to determine appropriateness of facility response, healthcare and programming. When injuries were involves in the allegations, assessed individuals and documented findings.

Assisted with training new surveyors on the survey and investigation process, reviewed their work to ensure documentation met the required Principles in Documentation.

12/1999 to 06/2001 **RN Staff Nurse**

**Bastrop Nursing Center** – Bastrop, TX

Admitted residents into the facility. Provided assessments, medications and documentation regarding care and resident condition. Monitored intakes and outputs as needed, hygiene care and developed care plans.

**EDUCATION**

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05/1998

**Associate of Science: Nursing Science**  
**Austin Community College - Austin, TX**

NANCY MULLINS



**Summary**

Registered Nurse with twenty (20) years' experience working as a Nurse Consultant/Inspector regulating Kentucky's State Licensed and CMS Certified Health Care Facilities.

Assigned duties included serving as the member of a survey team to conduct licensure and/or certification surveys of all levels of health care. Although the main focus of my assigned duties and responsibilities was to survey Community Health Levels of Care, I did assist in performing surveys and/or complaints in Long Term Care Facilities when assigned. I am proficient in the use of Microsoft Word, Excel, Automated Survey Process Environment (ASPEN) and ASPEN Complaints/Incidents Tracking System (ACTS).

Serving as a member of a Health Care Survey Team I displayed the ability to serve as an active member of the team, respecting all viewpoints and understanding the importance of a team concept for inspecting health care facilities for compliance. I feel I work well with team members and can openly and respectfully discuss all conflicts/controversy in decision making. I openly seek assistance when appropriate to make decisions and resolve conflicts. I feel I work well under pressure and can handle more than one project at a time.

I consistently maintain up to date training and Continuing Education requirements. I am comfortable with a flexible work schedule, to include overnight stays away from home. I am always eager to learn new skills and find the opportunity to do so very rewarding.

In addition to my Kentucky State survey experience I took advantage of being close to the Tennessee State Line by pursuing health care job opportunities in the neighboring Tennessee. I have served as a weekend Charge Nurse, specializing in Psychiatric Services for the geriatric population.

Most recently (Since June 2021) I have been working as a Nurse Consultant with Corporate office and providing oversight to assist Ivy Healthcare Facilities get back in compliance with healthcare regulations/CMS regulations.

Overall, I have thirty (30) years of working experience in healthcare to include patient care, regulatory positions and leadership. While I have found each work experience rewarding, my desire is to continue to use my experience in health care regulatory compliance to help ensure compliance in health care facilities for the betterment of the nation's elderly and sick population.

## **Skills**

- Long Term Care Intermediate Care Facility (ICF/IDD) – CMS Surveyor Certified.
- Principles of Documentation (POD) – CMS Surveyor Certified.
- Critical Access Hospital – CMS Surveyor Certified.
- Rural Health Clinic – CMS Surveyor Certified.
- Acute Care (Hospital) – CMS Surveyor Certified.
- Advanced Acute Care (Hospital) – CMS Surveyor Certified.
- Hospital EMTALA (CMS Directed On-site Complaint) – CMS Surveyor Certified.
- Psychiatric Residential -Treatment Facilities – CMS Surveyor Certified.
- Home Health – CMS Surveyor Certification.
- Ambulatory Surgical Center – CMS Surveyor Certified.
- Emergency Preparedness – CMS Surveyor Certified.
- Critical Access Hospital – CMS Surveyor Certified.
- Hospice – CMS Surveyor Certified.
- CMS Universal Infection Control – CMS Surveyor Certified.
- CPR Certified.

## **Experience**

Nurse Consultant/Corporate staff for Ivy Healthcare Group-New York from 06/2021 to Current. Duties Included:

\*Provide oversight to assist facilities needing to get back in compliance with state and federal regulations and/or remain in compliance.

Behavioral Health Charge Registered Nurse I Tennova Health Care - Lafollette, TN from 04/2001 to Current. Duties Included:

- Provide patient care on a geriatric psychiatry inpatient unit. For example: Administer medication, Assess patient needs, admissions, transfers, discharge, care plans, electronic medical record documentation, etc.

Nurse Consultant/Public Health Inspector for Office of Inspector General • London, KY from 10/2000 to 06/2020. Retired with 20 years of experience. Duties Included:

- Conduct routine unannounced onsite visits to certified and state licensed health care facilities including: ICF/IDD, Acute Care Hospital, Home Health, Ambulatory Surgical Center, Critical Access Hospital, Rural Health Clinics, Psychiatric Residential Treatment Facility (PRTF) and Hospice Services. Served as part of a survey team to inspect and/or conduct complaint investigations of Long-Term Care Facilities as assigned. Utilized the ASPEN and ACTS CMS Certification programs to document Health Care Facility Survey findings, to include documentation on the CMS form 2567.

Psychiatric Mental Health Nurse Manager at Baptist Regional Medical Center - Corbin, Kentucky from 05/1991 to 02/2000. Duties Included:

- Provided patient care for psychiatric and chemical dependent patients to include partial hospitalization programs. Assessed patient needs. Provided supervision of staff, scheduling, and policies regarding patient care needs. Created agendas and communication materials for team meetings.

Emergency Medical Technician I Professional Medical Transport - Corbin, Kentucky from 08/1986 to 05/1991. Duties Included:

- Provided direct care to patients, including stabilizing patients and determining course of action based on triage. Assessed emergency situations and prioritized medical care for patients. Conducted equipment inspections and vehicle checks in adherence with required maintenance schedules.

Physician Office Manager at Dr. Bernard Moses Office located in Williamsburg Kentucky from 05/1978 to 05/1986. Duties Included:

- Performed and/or supervised other nurses in providing basic nursing for patients, as directed by the Physician. Ensured the office was adequately supplied with medical supplies and equipment to meet the needs of the patients.

## **Education and Training**

University of the Cumberland's, Williamsburg Kentucky 08/1982

**Bachelor of Science:** Clinical Psychology

Eastern Kentucky University, Richmond Kentucky 05/1991

**Associate of Science:** Registered Nurse



CMS Certified Surveyor: #16116

## **References**

1. Patricia Steward, Former Southern Branch Regional Manager for Office of Inspector General. Phone: [REDACTED]
2. Floyd Parrish, Former Director of Health Care Services for Office of Inspector General. Phone: [REDACTED]
3. Ed Webb, Former Regional Manager for Office of Inspector General. Phone: [REDACTED]

\*Additional References available upon request.

## *CURRICULUM VITÆ*

**Patricia L. Gonzales, Pharm.D.**

### **PERSONAL**

Residence:



### **EDUCATION**

*July 1996-July 1998 Fellowship in Psychiatric*

*Pharmacy Practice*

The University of Texas at Austin

Austin State Hospital

Austin, Texas

*July 1995-July 1996 Residency in Psychiatric Pharmacy Practice*

The University of Texas at Austin

Austin State Hospital

Austin, Texas

*July 1993-June 1995 Doctor of Pharmacy*

The University of Texas at Austin and

The University of Texas Health Science

Center at San Antonio

San Antonio, Texas

*June 1988-May 1993 Bachelor of Science in Pharmacy*

College of Pharmacy

The University of Texas at Austin

Austin, Texas

### **LICENSURE**

Pharmacist Licensure: 34224 Texas

Medication Therapy Management Certification (APhA 2013)

Surveyor Minimum Qualifications Test 35693

## PROFESSIONAL EXPERIENCE

*8/13/20 – 7/31/22*    **Clinical Pharmacist**, NeuroSensory Center of Austin, Bee Cave, TX

Responsible for administration and documentation of IV infusions and review of patient medical

*8/21/17- Present*    **Scientific Board Chairman**, Salus Investigational Review Board, Austin, TX

Responsible for review and approval of human subjects research protocols to ensure the rights and welfare of the research subjects are protected.- part time.

*3/1/15 – 7/10/20*    **Pharmacist Surveyor**, Health and Human Services Commission, Austin, TX

Responsible for conducting federal and state licensure inspections and investigations for nursing homes and assisted living facilities. Other duties have included training new surveyors, consulting to other regions, and conducting pharmacy reviews for noncompliant facilities.

*7/10/14-2/29/15*    **Clinical Pharmacist**, MTM department, Longhorn Health Solutions Pharmacy, Dripping Springs, TX

Responsible for development and implementation of MTM program which includes review and monitoring of medication regimens– part time.

*10/1/13-6/30/14*    **Pharmacist in Charge**, Allergy Pharmaceuticals, Austin, TX

Responsible for pharmacy regulatory and business aspects required for licensure of new pharmacy; supervision of compounding technicians and oversight of compounded products.

*9/1/07–8/31/13*    **Associate Professor, Cooperative Pharmacy Program**, The University of Texas Pan American, and the University of Texas College of Pharmacy

*1/1/05-6/30/06*    **Interim Assistant Dean, Cooperative Pharmacy Program**, The University of Texas Pan American, and the University of Texas College of Pharmacy

*1/1/10-5/1/12*    **Main Street Pharmacy, Donna, TX**

Co-owner and Pharmacist In Charge: responsible for establishment, management and oversight of the daily operations of a retail independent pharmacy. Provision of medications and medication education along with consultation to providers.

*9/1/01- 8/31/07*    **Assistant Professor, Cooperative Pharmacy Program**, The University of Texas at Pan American, Edinburg, TX.

A tenure-track position that includes the following: Establishment and maintenance of a psychiatric pharmacy practice in affiliation with a community institution, concurrent

didactic teaching (pharmacy and other allied health programs), student advisement, preceptorship of pharmacy students on clinical rotations, and independent/collaborative research. Participation in academic activities such as professional meetings, College of Pharmacy and College of Health Sciences and Human Services committees, publications, outreach, and other scholarly ventures.

*09/01/00-8/31/01*     **Clinical Assistant Professor and Associate Director for the Multistate Algorithm Implementation Program, The University of Texas College of Pharmacy, Pharmacy Practice & Administration Dept, Austin, TX.**

Responsible for providing clinical and technical assistance for state and local mental health authorities who wish to implement medication treatment algorithms in the care of the severely mentally ill treated in the public mental health sector. Assist assuring that the participating states receive an orientation to the project, education and training regarding pharmacotherapy of the respective disorders, the algorithmic approach to care, patient education, and documentation. Assist in overseeing implementation of the clinical and technical support system for algorithm implementation, including teleconferences, newsletters, e-mail, web-based communications, and the quality improvement program. Responsible for facilitating biweekly teleconferences, used to discuss issues that the clinicians may have with using the algorithms, answer questions related to pharmacology and therapeutics, and discuss treatment options for challenging patients. Also accountable for program manual revisions, providing ongoing consultation and assisting with development of database management. Outreach activities as a clinical assistant professor include pharmacotherapy lectures for the Austin State Hospital psychiatry residency program and involvement in ongoing clinical research at Radiant Research.

*Aug 1998-2000*     **Assistant professor, Auburn University School of Pharmacy, Clinical Pharmacy Practice Dept., Auburn University, Alabama.**

Supervisor: Robert E. Smith, Pharm.D., Department Chair, Pharmacy Practice Dept.

Establishment and maintenance of an outpatient mental health clinic, long term care nursing home and inpatient psychiatric pharmacy services at the Dept of Veterans' Affairs Medical Center in Tuscaloosa, Alabama, with concurrent didactic teaching and preceptorship of Auburn University pharmacy students on clinical rotations. Active involvement in ongoing clinical research as well as independent research. Participation in academic activities such as professional meetings, School of Pharmacy and VA committees, publications, outreach and other scholarly ventures.

*Sept 1996-May 1998*     **Relief pharmacist, HEB Pharmacies, Austin, Texas.**

Supervisor: Paul Delamore, RPh., Pharmacy Manager.

Distribution of prescription and OTC medication and patient counseling in outpatient pharmacy.

*July 1995-June 1998*     **Clinical instructor, University of Texas College of Pharmacy, Pharmacy Practice & Administration Dept. Austin, Texas.**

Supervision of baccalaureate pharmacy students and doctor of pharmacy students on acute care rotations that includes weekly discussions, case presentations and

consultations, and evaluation of student performance in the clinical setting. Didactic teaching experience with baccalaureate and doctor of pharmacy students.

*Aug 1996-Feb 1997*      **Clinical Study Coordinator, Texas Research Associates,**  
Austin, Texas.

Participation in screening and contacting potential subjects for enrollment in a clinical study conducted by Eli Lilly Pharmaceuticals. Responsible for scheduling study visits and maintaining case report forms, progress notes, drug distribution records, enrollment log and laboratory requisitions. Clinical activities included monitoring for adverse events using the UKU, measuring vital signs, ensuring compliance, collecting, preparing and shipping blood samples for safety and pharmacokinetic monitoring, and obtaining electrocardiographic readings. Responsible for communications between Texas Research Associates and primary investigator, which included notification of protocol changes, enrollment status, and queries.

*June 1993-May 1995*      **Part-time Staff Pharmacist, American Pharmaceutical Services,** San Antonio, Texas. Supervisor: James L. Stultz, RPh., Pharmacy Manager. Provision of pharmaceutical care to hospice patients and 40 nursing homes that includes parenteral therapy, enteral feedings, colostomy/urostomy supplies, durable medical equipment, intravenous antibiotic pharmacokinetics, and drug information. Development of an H<sub>2</sub> antagonist utilization program and continuous CII inventory. Presentation of inservices to pharmacy staff and nurses, and written consultations on disease management and specific drug utilization/monitoring in the elderly. Management of pharmacy technicians and delivery staff and training of technicians in the preparation of sterile admixtures.

*July-December 1993*      **Part-time Staff Pharmacist, University Hospital,** San Antonio, Texas. Supervisor: Yolanda Laurel, RPh., Director of Pharmacy. Provision of pharmacy services, including adverse drug reporting, medication interventions, drug information and medication distribution, for a 700 bed county hospital. Services provided through both central and decentralized pharmacies. Participation in Pharmacy and Therapeutics committee and preparation of drug monographs. Distribution of medication and patient counseling in active outpatient pharmacy.

*Dec 1992-Dec 1993*      **Research Assistant, The Department of Pharmacology and Toxicology,** The College of Pharmacy, The University of Texas at Austin, Austin, Texas. Supervisor: Serrine Lau, PhD., Director of Pharmacology and Toxicology. Participation in literature review, development of hypothesis and method design, tissue collection, preparation of assays, data collection/interpretation and HPLC and mass spectrometry analysis. Responsible for publication of abstract.

## **TEACHING EXPERIENCE**

*Sept 2007-Aug 2013*      *Course instructor/coordinator for Service Learning (includes supervision of student-driven research projects) PHR 289 Fall and Spring*

*Jan 2002-2007*      *Psychopathology and Function*

*Sept 2003-May 2007*      *Medical Terminology HRP 2303 sections 1 and 2*

*September 2005 Learning Frameworks UNIV 1301 section 35*

*January 2004 Psychopharmacology, PSY 6362, UTPA*

*June 2002-2006 Establishment of an experiential site/clinical pharmacy services  
Rio Grande State Center and Tropical of Texas MHMR*

*June 2002-2003 Human Physiology*

*May 2000 Neuropathology*

*Jan 1999 – Aug 2000 Psychiatry/Neurology Pharmacotherapy Module*

*Sept 1998 – Aug 2000 Pharmacy Practice Experience (PPE) - Team leader*

*Aug 1999-Aug 2000 Veterans' Affairs/Samford School of Pharmacy Residency  
Program Preceptor*

## **SCHOLARLY ACTIVITIES**

### **POSTERS**

Dec 2012 *“Diabetes Screening in South Texas: Prevalence, Risks and Patient Awareness”* – presented at the ASHP Midyear meeting in collaboration with pharmacy students

Dec 2012 *“Impact of a Pharmacist-Led health Fair on Disease State Understanding”* – presented at the ASHP Midyear meeting

Oct 2012 *“Depression Education Websites: A Focus on Language and Readability” a five year follow up study* – presented at the UTPA Explore and Engage in collaboration with Liana Garza, Cooperative Pharmacy program student

Feb 2012 *“Guanfacine extended release (Intuniv) in ADHD: Where does it fit?”*- presented at the college of Health Sciences and Human Services Student Research Conference in collaboration with Julio Tovar P4 student

April 2010 *“Self-Reported Discrimination in Cooperative Pharmacy Students Attending a School of Pharmacy”* – presented at the Southwest Psychological Association annual meeting, Spring 2010.

Fall 2010 *“Depression Education Websites: A Focus on language and Readability”* – presented at the 33<sup>rd</sup> Annual Texas Society of Allied Health Professions meeting.

April 2009 *“The Benefit of Psychiatric Pharmacy Case Management in a Pediatric Outpatient Clinic” – Original research*

Work in progress presented at the Louis C. Littlefield Celebration of Research Day, College of Pharmacy, The University of Texas at Austin

Feb 2008 *“An Assessment of Stress Experience by Students in a Prepharmacy Curriculum” – presented at the SWPA conference.*

Dec 2007 *“Understanding Health Information: Influence of Pictures and Reading Level”– Original research*

Work in progress presented at the ASHP Midyear meeting, Las Vegas, Nevada; in collaboration with Kristina Gonzalez, Pharm.D. candidate

Dec 2007 *“Perceived Prejudice in Cooperative Pharmacy Students Attending a School of Pharmacy” – Original research*

Results presented at the ASHP Midyear meeting, Las Vegas, Nevada; in collaboration with Yvette Garcia, Pharm.D. candidate

April 2006 *“Perceived Prejudice in Cooperative Pharmacy Students Attending a School of Pharmacy” – Original research*

Preliminary results presented at the Celebration of Research Day, College of Pharmacy, The University of Texas at Austin.

April 2006 *“Assessment of Stress Experienced by Students in a Prepharmacy Curriculum” – Original research*

Poster presented at the Southwest Psychological Association Meeting by second author Dr. Peter Kranz

October 2005 *“Depression Screening in Primary Care”- Original research*

Poster presented at the American College of Clinical Pharmacy Annual Meeting, San Francisco, CA, October 26, 2005.

March 2005 *“Depression Screening in Primary Care”- Original research*

Presented to the Research Committee, The College of Health Sciences and Human Services, The University of Texas Pan American, March 24, 2005.

April 2005 *Interim results of “Perceptions and Attitudes Towards Research Participation”*

Poster presented at the Celebration of Research, the University of Texas at Austin, College of Pharmacy, April 26, 2005.

*December 2004 Interim results of "Retrospective Review of Combination Atypical Antipsychotic Use"*

Poster presented at the American Society of Health System Pharmacists Annual Midyear Clinical Meeting in Orlando, FL, December 2004.

*April 2005 Interim results of "Depression Screening in Primary Care"* Submitted and accepted for poster presentation at the Annual meeting of the American College of Clinical Pharmacy, Myrtle Beach, SC, Spring Practice & Research Forum (due to flight delays, the poster was not presented at this meeting and was moved to the Fall 2005 meeting in San Francisco, CA).

*July 2004 An Assessment of Stress Experienced by Students in a Pharmacy Curriculum- research in progress*

Interim results presented at the American Association of Colleges of Pharmacy 105<sup>th</sup> Annual Meeting, Salt Lake City, Utah

*Nov 2000 Prevalence of Unrecognized Depressive Disorders in VA New Admissions*

Poster presentation, Fall Poster Forum, Auburn School of Pharmacy, Auburn, AL

*April 2000 A Retrospective Review to Determine OBRA '87 Compliance Rates in a VA Nursing Home*

Poster presentation, Spring Poster Forum, Auburn School of Pharmacy, Auburn, AL

*April 2000 The Prevalence of Medication Usage Without Indications and Untreated Indications in Nursing Home Residents-Addison Holder, Pharm.D. Candidate*

Poster presentation, Spring Poster Forum, Auburn School of Pharmacy, Auburn, AL *Student Supervisor*

*Dec 1999 Donepezil for the Management of Noncognitive Symptoms of Alzheimer's Disease* Poster presentation, 34<sup>th</sup> Annual ASHP Midyear Clinical Meeting and Exhibits, Orlando, FL

*Dec 1998 Wellbutrin SR in the Treatment of Posttraumatic Stress Disorder*

Poster presentation, 33<sup>rd</sup> Annual ASHP Midyear Clinical Meeting and Exhibits, Las Vegas, NE

*Dec 1998 Evaluation of Combination Antipsychotic Therapy* Poster presentation, 33<sup>rd</sup> Annual ASHP Midyear Clinical Meeting and Exhibits, Las Vegas, NE

*Dec 1997 Assessment of Psychiatric Pharmacy Services Outcomes* Poster presentation, 32<sup>nd</sup> Annual ASHP Midyear Clinical Meeting and Exhibits, Atlanta, GA

*April 1997 Effects of Pharmaceutical Care on Clinical Outcomes in an Inpatient Psychiatric Setting* Poster presentation, TSHP Annual Meeting, Austin, TX



Dec 1996 *Effects of Pharmaceutical Care on Clinical Outcomes in an Inpatient Psychiatric Setting* Poster presentation, 31<sup>st</sup> Annual ASHP Midyear Clinical Meeting and Exhibits, Las Vegas, NE

March 1993 *Formation of 8-Hydroxydeoxyguanosine by Quinol-thioethers*  
Poster presentation, Division of Pharmacology and Toxicology Society of Toxicology 32nd Annual Meeting, New Orleans, LA

## PUBLICATIONS

**Gonzales PL**, Kranz P. *Self reported Discrimination in Cooperative Pharmacy Students Attending a School of Pharmacy* submitted to the Journal of Hispanic Higher Education December 2012

**Canales-Gonzales PL**, Kranz P. Perceived stress by students in a pharmacy curriculum. *Education* 2008; 129(1):139-46.

**Canales PL**, Kranz P. An assessment of stress experienced by students in a prepharmacy curriculum. *Journal of Instructional Psychology* 2008; 35(1):17-22.

**Canales PL**. Depression screening in primary care. *Pharmacotherapy* 2005; 25(10):512.

**Canales PL**, Kranz P. An assessment of stress experienced by students in a prepharmacy curriculum. *American Journal of Pharmaceutical Education* 2004; 68(2) Article 54.

Crismon ML, **Canales PL**. Chapter 48: Insomnia. *Handbook of Nonprescription Drugs*. 14<sup>th</sup> ed. 2003.

**Canales PL**, McIntyre WJ. The recognition and management of depression and anxiety in cancer patients. Review article for AJHP

**Canales PL**, Crismon ML. Side effects of antipsychotic drugs: A two-part series. *Informed Prescriber*. Merck Medco, 2001

Crismon ML, **Canales PL**. Chapter 42: Insomnia. *Handbook of Nonprescription Drugs*. 13<sup>th</sup> ed. 2002.

**Canales PL**, Crismon ML. Chapter 43: Drowsiness. *Handbook of Nonprescription Drugs*. 13<sup>th</sup> ed. 2002.

**Canales PL**, Crismon ML, Dorson PG. Outcomes assessment of clinical pharmacy services in a psychiatric inpatient setting. *Am J Health-Syst Pharm* 2001; 58:1309-16.

**Canales PL**, Cates M, Wells B. Chapter 55: Anxiety Disorders. *The Textbook of Therapeutics: Drug and Disease Management*. 7<sup>th</sup> ed. 1999.

**Canales PL**, Olsen J, Miller AL, Crismon ML. Role of Antipsychotic Polypharmacotherapy in the Treatment of Schizophrenia *CNS Drugs* 1999; 12(3):179-88  
**Canales PL**, Crismon ML. The Use of Hypnotics. *The One-Minute Counselor* 1996.

**Canales PL**, Kleiner HE, Monks TJ, Lau SS. Formation of 8-hydroxy-deoxyguanosine by quinolthioethers[ABSTRACT]. *The Toxicologist* 1993;13(1):202.

## **SERVICE TO DISCIPLINE, UNIVERSITY, COMMUNITY**

Sept 2012- Aug 2013      *Chair*, Investigational Review Board, The University of Texas-Pan American; responsible for review of all expedited/exempt university research proposals to ensure the protection of human subjects. Oversight of committee review of full proposals and administrative/legal compliance with human subjects protection.

Sept 2010-Aug 2013      *Faculty Development*, UTCOP, The University of Texas at Austin

Sept 2010-Aug 2013      Professional Development Committee, UTCOP, The University of Texas at Austin

Fall 2005-Aug 2013      *Promotion and Tenure Committee*, COHSHS, The University of Texas-Pan American

Sept 2007-Aug 2013      *Faculty Search Committee*, Cooperative Pharmacy Program, The University of Texas-Pan American

Sept 2007-Aug 2013      *Admissions Committee*, Cooperative Pharmacy Program, The University of Texas- Pan American

Sept 2001- Aug 2013      *Advisor*, Bronc Prepharmacy Association, The University of Texas-Pan American

Sept 2007-Aug 2013      *Performance Review Committee*, Cooperative Pharmacy Program, The University of Texas- Pan American

Sept 2007-Aug 2013      *Research Committee, Chairperson (2007)*, College of Health Sciences and Human Services, The University of Texas- Pan American

Sept 2007-Aug 2013      *Curriculum Committee*, College of Pharmacy, The University of Texas at Austin

Sept 2007-2010 *Awards and Recognition Committee*, College of Health Sciences and Human Services, The University of Texas- Pan American

Sept 2003-2013 *Board member*, Investigational Review Board, The University of Texas-Pan American; responsible for review of full proposals with regard to human subjects protection.

Oct 1998 – Aug 2000 *Curriculum Committee*, Auburn University School of Pharmacy

Aug 1999 – Aug 2000 *Outcomes Assessment Committee*, Auburn University School of Pharmacy

Sept 1998 – Aug 2000 *Pharmacy and Therapeutics Committee*, Tuscaloosa VA Medical Center

Nov 1998 – Aug 2000 *Research & Development Committee*, Tuscaloosa VA Medical Center

Aug 1999 – July 2000 Chairperson, *Research & Development Committee*, Tuscaloosa VA Medical Center

**Paula A. Higgs, RN, MSN/MHA, SMOT, CLNC**



## **SUMMARY OF QUALIFICATIONS**

- 29 years' nursing experience primarily in the areas of long-term care, senior care, ICF/DD, behavioral health, regulatory compliance, and consulting keeping abreast to updates clinically and regulatory.
- 12 years' experience in surveying/investigating healthcare facilities for regulatory and accreditation agencies (State of Texas, State of Arizona, Centers of Medicare & Medicaid Services, Veterans Administration, The Joint Commission and Accreditation Commission for Health Care).
- Leadership experience as a Supervisory Charge Nurse, Director of Nursing, Regional Nurse Consultant, Clinical Services Director, Compliance Partner, and Director of Risk Management and Performance improvement.
- Educational experience as a nursing mentor and clinical nursing instructor.

## **PROFESSIONAL EXPERIENCE**

### **Ensign Services**

February 2021 – Present

Compliance Partner for LTC/ALF facilities

### **Health and Human Services Commission (Formerly DADS) – State of Texas**

(Contract)

September 2020 – February 2021

Healthcare Investigator/Surveyor for LTC/ALF Facilities

### **Healthcare Quality Consultants (Contract) Texas**

January 2020 – Present

Nurse Consultant

### **Mayhill Hospital, Denton, Texas**

August 2019 – December 2019

Director of Risk and Quality Assurance

### **Omnicare Pharmacy, (Remote) Texas/Oklahoma**

January 2018 – August 2019

QA Nurse Consultant

**Cigna Healthspring, (Contract)North Texas**  
September 2017- January 2018  
Case Management Specialist

**Healthcare Management Services, (Remote)National**  
November 2016- January 2018  
Medical Facilities Surveyor

**The Joint Commission, (remote) National**  
February 2013 to March 2014  
Field Representative/Surveyor

**Milestone Healthcare, (remote) National**  
Contracted since August 2012-February 2013  
Psychiatric/Geropsychiatric Clinical Services Director

**Texas Department of Aging and Disability (DADS), Texas**  
September 2011-July 2013  
Nurse Surveyor/Investigator

**Carrollton Springs Hospital, Carrollton, Texas**  
October 2011-May 2012  
Chief Nursing Officer

**Ascellon Corporation, (Remote) National**  
October 2010- October 2011  
VA Long Term Care/Domiciliary Surveyor/Consultant & CMS Psychiatric Hospital Surveyor

**Texas Department of Aging and Disability (DADS), Texas**  
June 2009-August 2010  
Registered Nurse Surveyor

**Concorde Career Colleges, Inc, Arlington Texas**  
February 2009 – May 2009  
Vocational Nursing Clinical Instructor

**Mental Health Assoc. of Tarrant County, Fort Worth, Texas**  
March 2006 – May 2009  
Volunteer Nurse Ombudsman

**Heatherglen Nursing Facility, Glendale, Arizona**  
October 2004 – December 2005  
Director of Nursing & Remote Nurse Consultant

**State of Arizona, Phoenix, Arizona**

January 2000 – January 2005  
Health Care Facilities Inspection Specialist (Long-Term Care, ICF/DD Surveyor)

**Kelly Healthcare**, Mesa, Arizona  
May 1999 – January 2000  
Independent Nurse Practitioner

**Welborn Baptist Hospital**, Evansville, Indiana  
October 1994 – December 1998  
Supervisory Charge Nurse

**Evansville State Hospital**, Evansville, Indiana  
March 1993 – October 1994  
Nursing Supervisor

## **EDUCATION**

**University of Phoenix**, 2008  
MSN, Masters Degree in Nursing  
MHA, Masters Degree in Health Administration

**University of Phoenix**, 2006  
BSN, Bachelors Degree in Nursing

**University of Southern Indiana**, 1992  
ADN, Associates Degree in Nursing

**Indiana Vocational Technical College**, 1988  
AAS, Associate of Applied Science Degree in Electronics Technology

## **PROFESSIONAL ACCOMPLISHMENTS & AFFILIATIONS**

- Surveyors Minimum Qualification Test (SMQT) Certification
- Member of AADNS (American Association of Directors of Nursing Services)
- Basic Life Support (BLS) and First Aid Certifications
- Certified Legal Nurse Consultant (CLNC) Certification
- Member of TALA (Texas Assisted Living Association)
- Completion of 24 hour Assisted Living Manager training
- Completion of CDC Infection Preventionist Certification
- RAC-CT

# Rachele Kemp, LPN



## Summary:

I am currently SMQT certified and have been surveying nursing homes for OSDH the last two years. My job has been infection control concerning COVID-19 for the last year and a half. My experience as an LPN was with home health, long term care, skilled units and Lindsey Hospital.

## Accomplishments:

- I passed my SMQT test in January of 2020.
- I organized a two mile walk which involved the whole school and any parents that wanted to participate.
- I organized the partnership with coke and digi walkers. The whole school including the staff participated in a ten thousand step challenge. We all received digi walkers for participating.
- As a Physical Education teacher, I applied for a ten-thousand-dollar grant. The school received two thousand dollars in addition to some Physical Education equipment.

## Education:

B.S. Physical Education

University of Science and Arts of Oklahoma, Chickasha, OK

Diploma

Cement High School, Cement, Ok

## Training:

Redlands CC in the RN program for one year.

LPN certification obtained.

## Work Experience:

**OSDH**

**Facility surveyor**

**June 2019 - Present**

**Lindsay Hospital**

**LPN**

**September 2018 - June 2019**

**Grace Living Centers**

**Nurse**

**October 2013 - September 2018**

**Ross Home Health of Chickasha LLC**

**Nurse**

**May 2013 - September 2013**

## Other Experience:

**Amber Pocasset School District 128**

**Mathematics Teacher**

**Lawton Public Schools**

**Mathematics Teacher**

**Chickasha public school**

**Mathematics Teacher**

**Lawton Public Schools**

**Mathematics Teacher**

## Renee Cummins, RN



### Skills:

- Nursing Home
- RN
- Rehab
- Skilled Nursing
- Nursing
- State Surveyor (10+ years)
- Medication Administration
- Nurse Management
- Hospital Experience
- Case Management
- Infection Control Training
- MDS
- Experience Administering Injections
- Hospice Care
- EMR Systems
- Medical terminology
- Healthcare Management
- Employee Orientation

### Education:

Associate of Applied Science in United States Nursing 1999  
North Central Michigan College, Petoskey, MI

### Nursing Licenses:

RN - Expires: July 2022  
State: MI

RN - Expires: November 2021  
State: NE

RN - Expires: 2021  
State: NV

### Certifications and Licenses:

SMQT Federal Certification July 2011  
Centers for Medicare & Medicaid Services

BLS Certification March 2019 - March 2021

### Work Experience:

**Healthcare Management Solutions, LLC., Fairmont, WV August 2020 - August 2021**  
**Healthcare Facilities Surveyor**

- Long term care annual, Infection Control, Comparative and Federal Oversight surveys in Skilled Nursing Centers nationwide.

**Warnerview Skilled Nursing Facility, Modoc Medical Center, Alturas, CA May 2019 - November 2019**

### Director of Nursing

- For 50 bed long term care skilled nursing facility.



## **Renee Cummins, RN**



- Responsibilities include, but not limited to: day to day operations, investigation of incidents, plan of corrections for incidents, organize and run monthly quality leadership team, active involvement in high risk/quality measures for best practice.

**State of Michigan, Licensing and Regulatory Affairs, Gaylord, MI      November 2011 - May 2019**

### **Health Care Surveyor**

- Conduct onsite surveys for long term care federal certification and/or the investigation of complaints against providers to ensure compliance with federal regulations utilizing the Long Term Care Survey Process.
- Ensure nursing process is in place to meet physical, mental, psychosocial and health service needs of the long term care/extended stay patient. Identify issues, problems and opportunities, use comparative analysis to draw conclusions and substantiate deficient practice. Utilize the State Operation Manual and assign appropriate scope and severity levels.

**State of Michigan, Department of Corrections, Baraga, MI**

**March 2010 - October 2011**

### **Registered Nurse**

- Responsible for health assessment and care of the State of Michigan's incarcerated citizens.
- Registered Nurse Case Manager.

**Munson Home Health, Gaylord, MI**

**August 2008 - July 2009**

### **Registered Nurse (RN)**

- Responsible for collaboration and supervision of a multidisciplinary team to provide outcome oriented and cost efficient care to an assigned caseload of a home based patient population.
- Registered Nurse Supervisor.

**Otsego Memorial Hospital, Gaylord, MI**

**September 1999 - August 2008**

### **Registered Nurse (RN)**

Responsible for collaboration with other departments to insure patient safety, customer service and a seamless flow for patients and families served, accuracy of physician orders both at the bedside and in the computer, monitoring and maintaining staffing and to facilitate teamwork.

- Telemetry unit serving geriatrics, cardiac, neurological, orthopedic, urological and gynecological patients.
- Emergency department nurse.
- Orthopedic clinical assistant responsible for assisting orthopedic surgeon, including but not limited to: casting, injections, wound care, reduction of fractures, medication reconciliation.
- First assist in OR and minor surgical office procedures.
- Responsible for staff development of clinical assistants.

# RHONDA RODRIGUEZ RN BSN

[linkedin.com/in/rhonda-rodriguez-5a724a127](https://www.linkedin.com/in/rhonda-rodriguez-5a724a127)

An autonomous Nurse Consultant/Surveyor that is task oriented with attention to detail is seeking a position to use my skills to continue to help advocate for the elderly.

## SKILLS

- Advocator
- Self-Motivated
- Team Player
- Attention to Detail
- Computer Skills
- Leadership Skills
- SMQT Certified
- Analytical
- Problem Solver
- Time Management Skills
- Communication Skills
- Active Listener

## EXPERIENCE

FEBRUARY 2017 – PRESENT

### **NURSE CONSULTANT I/DEPARTMENT OF HEALTH SERVICE REGULATIONS**

I determine compliance of nursing homes with federal and state requirements through inspections.

NOVEMBER 2013 – JANUARY 2017

### **TRAVEL STAFF NURSE/DIALYSIS, FRESenius MEDICAL CARE**

I was responsible for the assessment, planning and evaluation of Dialysis patients care while in the Dialysis center.

## EDUCATION

MAY 2019

BACHELOR OF SCIENCE IN NURSING, FAYETTEVILLE STATE UNIVERSITY

MAY 2013

ASSOCIATE DEGREE IN NURSING, BEAUFORT COMMUNITY COLLEGE

# Seena B. Redan, NHA

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## Executive Profile

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Accomplished Healthcare Administrator with years of experience providing direct patient care and managing operations and sales in retirement/nursing home settings. Cultivating strong industry relationships to drive business development that emphasize excellent care and services. Recognized as an effective leader with excellent interpersonal and communication abilities. Possesses strong fiscal stewardship of assets and resources. Experienced consultant in developing resident centered programming and community culture.

## Professional Profile

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Knowledgeable in all aspects of nursing homes, nursing home compliance, and retirement communities.

- Strong work ethic and integrity
- Self-starter; team oriented
- Efficient, responsible, and dedicated
- Excellent communication skills
- Computer literate in Microsoft products
- Fiscal stewardship
- Effective Program and Project development
- Conflict resolution
- Staff development
- Recruitment, hiring, counseling
- Budget development
- Compliance consultant

## Achievements Summary

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- Successfully decreased excessive operating costs through efficient fiscal and budget planning.
- Educate and facilitate training with employees, family members, vendors and residents on resident centered care programs.
- Developed and implemented new employee orientation programs to include customer satisfaction training.
- Effectively decreased the number of state inspection citations.
- Development of 'out of the box' activity programming that meets the needs of a spectrum of residents.
- Oversaw and directed construction and renovation projects in retirement and skilled nursing settings.
- Regularly receive high satisfaction scores from staff, residents, and families.

## Work History

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**Health Facilities Surveyor**  
CertiSurv, LLC

**September 2019- present**

- Conduct annual long term care recertification surveys as assigned by the contracted state agencies.
- Conduct complaint, Infection Control and facility reported incident (FRI) investigations.

**Surveyor/Abaqis Trainer****June 2018 – August 2019**

Providigm, A HealthStream Company

- Conduct annual long term care compliance surveys as assigned by the contracted state agencies.
- Trainer – Abaqis. A quality management system that assists long term care facilities to enhance their QAPI programs and continuous survey readiness.

**Owner****January 2012 – Present**

55PlusHomeMatch, LLC

- Assist at-risk Elders to find an appropriate level of care
- A community based service and consulting expert
- Coordinate move from home to community
- Consult and educate Elder and/or Family about Levels of Care, Finances, selling of a home
- Buy and/or sell property as a Licensed Realtor
- Consultant to successfully open new assisted living communities focusing on program development and compliance

**Administrator****May 2017 - May 2018**

Vista View Care Center

*(25 resident Hospital Back-Up and Skilled Nursing Community)*

- 5 Star Rated Community
- High Acuity Resident Population – ventilators, wound care, dialysis
- 2017 – 2 deficiency survey

**Assistant Administrator****May 2016 - May 2017**

Cherry Creek Nursing Center

*(218 resident skilled nursing community)*

- Brought community from a 1 star to 4 star rating.
- Eliminated use of nursing agency.
- Responsible for Pay for Performance
- 2 deficiency survey

**Health Compliance Inspector****April 2015 – May 2016**

Colorado Department of Public Health and Environment

- Perform Annual Nursing Home Surveys according to QIS
- Perform Complaint Surveys
- SMQT Certified

**Executive Director****Sept. 2009 – Jan. 2012**

Keystone Place at Legacy Ridge, Westminster, CO

*(83 Independent Living Apts, 64 Assisted Living Apts, 13 Memory Care Apts)*

- Construction oversight including obtainment of Certificate of Occupancy and Life Safety Code
- Successful Medicaid certification for 20 assisted living Residents
- Over 50% pre-sold prior to opening IL

## **Additional Work History**

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- Nursing Home Administrator – Glen Ayr Health Center
- Nursing Home Administrator – Aspen Siesta
- Executive Director – Heritage Club of Aurora
- Director of Sales and Marketing – Evangelical Manor
- Executive Director/ Administrator – Life Care Services, LLC
- Interim Executive Director – Capital Senior Living
- Director Community Relations – Clare Oaks Retirement Community
- Nursing Home Administrator – La Jolla Care Center
- Administrator in Training – Country Villa Health Services
- Certified Therapeutic Recreation Specialist – Cedar Sinai Medical Center

## **Education and Licenses**

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- Assisted Living Administrator – Colorado
- Nursing Home Administrators License – Colorado #2269
- Leader in Dementia Care – Alzheimer’s Association: Colorado Chapter
- Certified Eden Alternative Associate
- Certified Therapeutic Recreation Specialist – 1990-2019
- Licensed Realtor – Colorado
- Surveyor Minimum Qualifications Test (**SMQT**).
- Bachelor of Science – University of North Carolina at Greensboro, Greensboro, NC
- Associate of Science – County College of Morris, Randolph, NJ

## **Memberships / Volunteer Experiences**

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- Alzheimer’s Association –2012, 2013, 2014, 2015 Planning Committee – Walk to End Alzheimer’s – Denver
- Alzheimer’s Association – Speaker’s Bureau 2014, 2015, 2016, 2017, 2018
- Alzheimer’s Association – The Longest Day 2020 – Planning Committee
- 2015 – Volunteer of the Year – Alzheimer’s Association

## **References**

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- Available upon request

## SHERRY L. GREEN, R.N.



### OBJECTIVE:

Provide initial survey, re-certification, and investigative services of End Stage Renal Disease facilities to determine compliance with applicable state and/or federal laws and regulations to ensure the delivery of quality care to patients.

### EDUCATION:

12/1994                      El Centro COLLEGE  
Dallas, TX

### EXPERIENCE:

2016 and 2017                      New Mexico State Department of Health  
Nurse Surveyor - Contracted  
Responsible for:

- Conduct on-site surveys and investigations of Medicare certified End Stage Renal Disease facilities to determine compliance with applicable federal laws and regulations.
- Analyzes compiles and reviews complex, technical information derived from clinical record reviews, facility management and business record reviews, patient, consumer and facility staff interviews, and onsite observations.
- Evaluates management, supervision and quality of care delivery.

07/2014 – Present                      Oklahoma State Department of Health  
Nurse Surveyor - Contracted  
Responsible for:

- Conduct on-site surveys and investigations of Medicare certified End Stage Renal Disease facilities to determine compliance with applicable federal laws and regulations.
- Analyzes compiles and reviews complex, technical information derived from clinical record reviews, facility management and business record reviews, patient, consumer and facility staff interviews, and onsite observations.
- Evaluates management, supervision and quality of care delivery.
- Determines the validity of the allegations in the complaint and compliance with federal regulations, and documents survey and investigation findings in the Automated Survey Processing Environment (ASPEN).
- Reviews plans of correction submitted by End Stage Renal Disease facilities to determine acceptability.
- Develops recommendations for adverse state enforcement action and federal termination action if applicable, and refers to other regulatory entities if appropriate.

01/2011 – Present                      Texas Department of State Health Services  
Arlington, TX  
Nurse IV Surveyor  
Responsible for:

- Conduct on-site surveys and investigations of licensed and/or Medicare certified End Stage Renal Disease facilities and other health care facilities to determine compliance with applicable state and federal laws, regulations, and rules.
- Analyzes compiles and reviews complex, technical information derived from clinical record reviews, facility management and business record reviews, patient, consumer and facility staff interviews, and onsite observations.
- Evaluates management, supervision and quality of care delivery.
- Determines the validity of the allegations in the complaint and compliance with state and federal regulations, and documents survey and investigation findings in the Automated Survey Processing Environment (ASPEN).
- Reviews plans of correction submitted by End Stage Renal Disease facilities and other healthcare facilities to determine acceptability.
- Develops recommendations for adverse state enforcement action and federal termination action if applicable, and refers to other regulatory entities if appropriate.
- Provides consultation and serves as a preceptor and mentor in the orientation and initial training of newly employed surveyors.
- Provides consultation and pre-survey conferences to regulated End Stage Renal Disease facility providers and potential providers to assist them in maintaining compliance with state and federal regulations.
- Responds to inquiries and requests from providers and health care consumers regarding regulated facilities, both verbally and in writing.

11/2009 – 01/2011

ESRD Network of Texas, Inc.

Dallas, TX

Patient Services/Quality Improvement Nurse

Responsible for:

- Clinical liaison and advocate to the renal community when patients and family have complaints or concerns about the care received
- Facilitator of DSHS referrals made to the Medical Review board
- Assisting and monitoring dialysis facilities that have been placed on a Corrective Action Plan (CAP) by DSHS
- Assisting dialysis facilities to move toward successful completion of the CAP
- Monitor dialysis facilities' quality data outcomes
- Assist dialysis facilities to move toward making "Fistulas First"
- Conduct QAPI program training conference calls with dialysis facilities to promote consistent and continuous long term tracking, trending, and analysis of facility data
- Interim Patient Advisory Committee liaison

08/2005 – 09/2009

LIBERTY DIALYSIS, LLC

Area Administrator: Lancaster Dialysis, Liberty Dialysis-Mesquite, Liberty Dialysis-Duncanville, and Liberty Dialysis-Rockwall

Responsible for:

- Overall operations for nursing services
- Financial Management
- Risk Management/Quality Assurance Compliance
- Patient Care Management
- Employee Management

03/2003 – 08/2005

FRESENIUS MEDICAL CARE- REDBIRD DIALYSIS CENTER

Dallas, TX

Clinical Manager

Responsible for:

- Implementation of written policies and procedures concerning all aspects of facility operations

- Ensure compliance with all regulations and ordinances.
- OSHA and all safety compliance.
- Participate in State and Federal inspections.
- Direct supervision of all staff.
- Control all admissions and present to attending physician.
- Staffing and scheduling including the hiring /firing of employees, training, planning, performance reviews.
- Direct patient care.

06/1998 – 03/2003  
07-2008 PRN

METHODIST MEDICAL CENTER  
Dallas, TX  
Staff Nurse

Responsible for:

- Initiated and monitored the hemodialysis and acute patients.
- Cannulate the permanent graft, i.e., AV Fistula or loop graft.
- Monitored for hyper and hypotension, infection and arrhythmias and reported changes.
- Administered the scheduling of PO, IVP, IVPB, medications and dress-dressing changes.
- Critical care and isolation care
- Three years experience initiating and monitoring the patient requiring Apheresis.
- Charge Nurse duties.
- Infection Control Nurse for the department
- Employee scheduling in the Hemodialysis unit.

04/1996 – 1998  
HEALTH

MAXIMUM CARE HOME HEALTH, TENDER LOVING CARE HOME  
and CARING HANDS HOME HEALTH  
Dallas, TX  
Field Nurse

Responsible for:

- Assessment and care of patients diagnosed with various illnesses in the home care setting.
- Administered PO, IM, SQ, and IV injections.
- Performed dressing changes and Foley catheter insertion.

Case Manager

- Created 485's and sent them to the physician for approval and made patient visitation schedule for the field nurses.

Assistant Director of Nursing

Responsible for:

- In charge of field nurses, LVN's and Home Health Aides.
- QA meetings with PT, OT, Social Worker and Pastoral Care.

12/1994 – 1996

BIOMEDICAL APPLICATIONS South Dallas County  
Dallas, TX  
Medication Nurse/Charge Nurse

Responsible for:

- Hemodialysis of chronically ill ESRD patient in the outpatient setting.
- Delegated duties to LVN's and PCT's.

05/1994 – 12/1994

TEXAS SCOTTISH RITE HOSPITAL  
Dallas, TX  
Pediatric Nurse Technician



Responsible for:

- Taking and monitoring vital signs.
- Monitored intravenous fluid infusions.
- Assessed intravenous sites.
- Inserted Foley catheters (male and female).
- Assessed orthopedic traction and casts.

**LICENSURE:** NCLEX taken January 1995  
Dallas, TX

**REFERENCES:** Provided upon request

# Sherry Reid



Willing to relocate: Anywhere

Authorized to work in the US for any employer

## Work Experience

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### **Regional Nurse Consultant**

Bridges Healthcare, Inc. - Tulsa, OK

August 2020 to Present

long term care and infection preventionist in the regional capacity

### **Travel Nurse Consultant**

LeaderStat, LLC - Powell, OH

February 2020 to Present

Travel nurse consultant, varies from unit manager to DON in LTC facilities. Initially one month assignment, contract maybe extended as need arises.

### **Director of Nursing**

Norman Veteran Center - Norman, OK

July 2018 to February 2020

Responsible for the supervision of approx. 276 employees. Responsibilities include QA, QAPI, PIPS and oversight of direct resident care. Assuring nursing services are being provided according to state, VA and federal regulations. Oversight of Infection control tracking, trending and antibiotic stewardship.

Oversight of wound management. Incident analysis daily with root cause analysis and steps to prevent recurrence. Daily review of physician orders, implementation and chart audits.

### **Certified Health Facility Surveyor**

Ascellon Corp

December 2017 to July 2018

as a nationwide consulting firm for LTC and VA facilities. I surveyed for Ascella the majority of the time in Georgia, New Mexico and Colorado. The survey program utilized at that time was the LTC which was implemented early 2018.

### **Director of Nursing for Long Term Care, Skilled Nursing**

Concordia Senior Living - Oklahoma City, OK

March 2017 to November 2017

memory support and assisted living. Supervision of 40-60 employees. Oversight of direct resident care and assurance of state and federal regulation compliance. Staff scheduling, assisting with MDS and care planning. Infection control tracking and trending, fall tracking and interventions, quality assurance and weekly wound assessments.

## **Executive Director, Fill in Director of Nursing**

The Mansion at Waterford - Oklahoma City, OK

December 2016 to March 2017

Manage the community and attempt complicate with state regulations for assisted living.

## **Travel Nurse**

Quarry Hills - Camden, ME

October 2016 to December 2016

Duties:

Travel nurse assignment. Quarry Hills is a CCR, which includes independent living, assisted living, memory care, long term care and skilled services. My assignment was for LTC, skilled services, bedside nursing. I also worked in assisted living and memory care as needed. I worked bedside nursing and passed medications with the PCC system.

## **Director of Resident Care**

McAlester/Shawnee - Shawnee, OK

April 2016 to October 2016

Function as the director of nursing, as an RN this includes assessments, care plans, plan of care and numerous nursing responsibilities. Bel fair of Shawnee is a 70 bed assisted living memory care community, with management of 30 care staff. When the McAlester community opens I will be the director of the community.

## **Medical Coding - Physical Therapy**

McAlester Regional Health Center - McAlester, OK

August 1989 to October 2016

McAlester, OK August 1989 - October 2016

Duties:

During my years of employment at the hospital I worked full time and as needed at different times. I worked in a variety of different capacities and different departments. Some of my experience working with the hospital include:

Medical Coding - Physical Therapy, Occupational Medicine, Radiology and Laboratory services with the 3M system remotely.

4 years I worked as an LPN my duties were general floor nursing responsibilities. I started on the skilled nursing floor and then transferred to the pre and post op floor, for two years. I then completed my RN degree in 2004. As an LPN and RN in a hospital setting you are required to work in other areas of the hospital when needed. The departments I have worked in the hospital include, skilled nursing, rehab, pediatrics, OB/GYN, medical and surgical units, the emergency room, dialysis and ICU. After going to work at the health department I continued my employment working on an as needed basis. During this time the majority of my work was on the skilled nursing unit and the rehab unit.

## **Director of Nursing**

EPWORTH VILLA - Oklahoma City, OK

October 2015 to April 2016

with oversight of two 24 resident skilled nursing households, one long term care unit of 18 residents and one memory care unit of 18 residents. Interviewing potential new staff, reprimands and evaluations of existing staff.

Ensuring resident care or needs provided in a timely manner. Daily review of physician orders, organizing admissions, discharge and assessing need for medical interventions. Tracking and trending of infections, fall, allegation of abuse/neglect. Reporting of incidents to OSD and follow ups. QA nursing reports and meetings. Staff in services and education with training as needed. On call three to four days a week for staffing or incidents that need to be addressed.

Training new staff on facility policies and procedures. Addressing family and residents' needs, concerns or complaints.

### **Certified Clinical Health Facility Surveyor**

McAlester Regional Health Center

February 2004 to October 2015

### **Certified Clinical Health Facility Surveyor**

McAlester Regional Health Center

February 2004 to October 2015

ensuring long term care facilities comply with state and federal regulations mandated by medicare and Medicaid. Surveys are conducted annually, followed up by revisit surveys within 90 days after the original survey. Complaints are investigated after they are triaged. During all the surveys, chart reviews are completed. Skills provided by the nursing staff for residents and dietary staff are observed for technique, infection control issues, ensuring physicians' orders are followed and resident rights are observed. Interviews are conducted with residents, families, staff and administration. Areas included in the survey process include resident care, pharmacology, abuse / neglect, quality of care, quality of life and physician services along with many others. After areas of deficient practice are identified, reports are prepared and submitted for State and Federal overview. The statements of deficient practice include medical record review, observation and interviews that determined the regulatory area had not been met. The facility is then required to complete a plan of correction. The plan is then submitted to the state regulatory office and if accepted by the surveyors a follow up survey is completed. I have functioned in the capacity of training new surveyors and been responsible for ensuring they have the knowledge necessary to pass the certification. QIS certification in survey process. Including SMQT Certification

### **RN**

McAlester Regional Health Center - McAlester, OK

November 1994 to September 2003

Public Health Nurse III The first five years I worked in the general health clinic. My responsibilities included adult and child immunizations, assisting the physician with physical examinations, pap smears, family planning clinic, women, infant and children health examinations and education, county breast feeding coordinator, school nurse one day a week, teaching health related classes, conducting senior citizens blood pressure clinics, health exam clinics and education. I was then promoted to work for Take Charge a program. The Take Charge program was through the Chronic Disease Services division of the state health department. The program was federally funded, with a focus on women age 50 to 64 which were low income, had no health insurance or were inadequately insured. I was responsible for the outreach in order to find women meeting the requirements and needing the services. The outreach included public speaking at events focused on women's health, passing out fliers and coordination with other entities in the health care field. I was responsible for the coordination of the clinics in the seven different county health departments in my territory. Once the women arrived at the clinic for their appointment,

I was responsible for providing a health evaluation and education, completing a physical examination, which included checking vital signs, obtaining a pap smears, completing a breast examination and pelvic examinations. Necessary laboratory test were obtained at this time if sexually transmitted diseases were suspected. The women were then referred for mammograms. After the results of the test were received I was responsible for referring the women with abnormal findings for needed ultrasounds, biopsies and mastectomies. These women were low income and inadequately insured, follow up care was a challenge. I was on the Pink Ribbon Committee and Susan G. Koman Committee and helped with the coordination of public events aimed at raising funds for the treatment of breast cancer for 4 years.

## Education

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### **Baccalaureate**

East Central University  
June 2002 to July 2004

## Skills

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- Nursing
- Memory Care
- Family Planning
- Infection Control Training
- Medication Administration
- Triage
- Vital Signs
- EMR Systems

## Certifications and Licenses

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### **RN**

### **BLS Certification**

### **CPR Certification**

# Susan C. Gosney

[REDACTED]

[REDACTED]

[REDACTED]

## **PROFESSIONAL SUMMARY:**

Seventeen plus years of experience as a Clinical Health Facility Surveyor for Long Term Care facilities. Efficient. Organized. Hard working. Dedicated. Flexible. Like to travel. Looking for a position in your organization.

## **LICENSE:**

Registered Nurse license – Oklahoma Board of Nursing. License number 33656. Issued 09/06/79. Expires 12/31/20.

## **SKILL HIGHLIGHTS:**

- Surveyor Minimum Qualifications Test – 08/2003.
- Thorough knowledge of Aspen Central Office, ASE-Q and the LTCSP tool.
- Thorough knowledge of Principles of Documentation for writing deficiencies in the CMS Statement of Deficiencies, Form 2567.
- Thorough knowledge of the State Operations Manual Appendix P, Appendix PP and Appendix Q.
- Thorough knowledge of the Long Term Care Survey Process and proficient in all tasks of recertification surveys.
- Thorough knowledge and skill in conducting LTC complaint investigations.
- National Certified Investigator & Inspector Training – initial course taken in 2006 and repeat courses in 2011 and 2015.
- CDC Nursing Home Infection Control Preventionist training course – 2020
- CDC's Antibiotic Stewardship Training Series – 05/2020

## **PROFESSIONAL EXPERIENCE:**

**06/2020 to current: Health Facilities Surveyor for CertiSurv, LLC., Columbia, TN**

**04/01/2019 to 06/2020: Senior Health Facility Surveyor for Healthcare Management Solutions LLC, 1000 Technology Dr, Suite 1310, Fairmont, WV 26554:**

Responsibilities: Conduct Long Term Care recertification/complaint surveys and Focused Infection Control surveys for state survey agencies across the United States and conduct Long Term Care comparative surveys for the Centers for Medicare & Medicaid Services Regional Offices. Write deficiencies for the Statement of Deficiencies (CMS Form 2567) and complete complaint reports when applicable, using the Principles of Documentation and the writing guides for the state/CMS. Maintain current knowledge of survey protocol and federal regulations.

**08/2018 to 03/31/19: Contract Health Facility Surveyor for Providigm, LLC, Denver CO.**

Responsibilities: Conduct Long Term Care recertification/complaint surveys for state survey agencies. Write deficiencies for the Statement of Deficiencies (CMS Form 2567) and complete complaint reports when applicable. Plan/schedule travel and other logistics for surveys in remote locations across the United States.

**11/2002 to 09/2018: Clinical Health Facility Surveyor with the Oklahoma State Department of Health (OSDH), Oklahoma City, OK:**

05/2018 to 09/2018: Supervisor of Long Term Care survey team (See responsibilities below.)

11/2013 to 05/2018: Supervisor of Intermediate Care Facilities for Individuals with Intellectual Disabilities survey team. (I continued to work frequently with LTC teams to conduct nursing home surveys and complaint investigations. I have worked exclusively with nursing home teams since 09/2017 while continuing supervisory responsibilities for the ICF/IID team.)

04/2007 to 11/2013: Supervisor of Long Term Care team. Scheduled surveys, survey follow-ups and complaint investigations to meet CMS/OSDH mandates. Prepared and reviewed required reports according to OSDH timelines. Consulted and interacted with facility staff regarding survey/investigation requirements and details. Attended required OSDH training and completed required CMS training online. Managed traditional/QIS /LTCSP surveys and complaint investigations as needed/required. Made team member assignments, handled personnel issues and completed performance evaluations.

11/2002 to 04/2007: Clinical Health Facility Surveyor team member. Acted as survey team leader as needed.

**01/1995 to 11/2002: Director of Nurses – Fairview Fellowship Home, Fairview, OK:**

Knowledge and implementation of federal/state regulations. Supervision of all aspects of nursing care/services for up to 136 residents who resided in the long term care facility. Staff hiring, disciplinary actions and terminations. Scheduled up to 90 staff (RNs, LPNs, CMAs and CNAs) to cover staffing needs/requirements. Conducted nursing and facility in-services. Completed staff performance evaluations. Knowledge of the survey process and interacted with state survey teams during surveys and complaint investigations.

**10/1979 to 01/1995: Staff RN - Director of Nurses – Drug Room Supervisor – Fairview Hospital, Fairview, OK**

**EDUCATION:**

05/1979 – Bachelor of Science in Nursing degree. Central State University (now the University of Central Oklahoma), Edmond, OK.

**REFERENCES:**

- Karen Gray, Health Facility Surveyor/QA, Healthcare Management Solutions, LLC. [REDACTED]
- Patricia Smith SLP, Clinical Health Facility Surveyor – OSDH – ICF/IID surveyor since 10/2013. [REDACTED]
- Rhonda McComas RN– OSDH – Supervisor of LTC survey team – 13 years of experience as CHFS. [REDACTED]



Susan (Newland) Harrison, R.N.  
4912 Eagle Ridge Court



OBJECTIVE: To protect the health of Ohioans

#### PROFESSIONAL EXPERIENCE

##### **Cedars of Lebanon**

December 2020 to present

- PRN Charge/Floor Nurse
- Provide direct nursing care to residents in accordance with resident plan of care including but not limited to medication administration, assessments, wound care, and documentation.
- Supervise direct care provided by Nursing Assistants
- Monitor the resident's condition and notify the physician as needed.

##### **Ohio Department of Health**

Columbus, OH

July 2013 to June 2020

(Retired from the State of Ohio with 32 years of service)

##### Facility Surveyor

- Complete Quality Indicator Surveys
- Complete Complaint Surveys
- Complete Residential Care Facility Surveys
- Complete Nurse Aide Training Competency Program Surveys
- Complete Intermediate Care Facility Surveys
- Mentor new employees

##### **Ohio Department of Rehabilitation and Corrections**

Lebanon, OH

Psychiatric Nurse

January 1999 to July 2013

- Completed detailed psychiatric screening, nursing assessments, planned, and implemented psychiatric care for offenders
- Served on multi-disciplinary mental health treatment team as a provider of psychiatric nursing services for mentally ill offenders
- Provided crisis intervention to offenders
- Conducted medication education and therapeutic groups
- Coordinated psychiatric appointments and assisted advanced level providers with examinations
- Administered medications and provided emergency and routine nursing care
- Served on facility Quality Assurance Improvement Committee
- Provided mental health training to employees at the institution

**Ohio Department of Mental Health**

Psychiatric Nurse

Cincinnati, OH

July 1988 to January 1999

- Assessed, evaluated, initiated, and provided nursing and medical care to hospitalized patients
- Directed delivery of psychiatric and nursing care of patients as delivered by professional and nonprofessional staff.
- Served as interdisciplinary treatment team member
- Educated staff on first aid, cardiopulmonary resuscitation, and unarmed self-defense
- Served on panel to interview and hire employees

**EDUCATION**

Good Samaritan School of Nursing Cincinnati, Ohio

Diploma in Nursing May 1988

Ohio Board of Nursing Licensed Registered Nurse RN.215672 issued 09/08/1988

American Red Cross Course: Adult and Pediatric First Aid/CPR/AED valid until 07/25/22

**Sylvia Rather RN**



**Work Experience**

Arkansas Department of Human Services                      Little Rock, AR                      May 2019 - Present  
DPSQA OLTC    RN Surveyor

Duties: SMQT certified Surveyor of Long-Term Care facilities in Arkansas. Assisted other departments during COVID shut down period (Med Needs). Twice Nominated Winner of Susan Burton Award.

Arkansas Department of Human Services                      Arkadelphia, AR                      July 2017 - May 2019  
DDS Children's Services RN Case Manager

Duties: Case Management for Children with Special Healthcare Needs. Responsible for the coordination of care for families in 19 counties in Southwest Arkansas. Performed Home visits and assisted families with applications for TEFRA, Autism Waiver, CES Waiver. Assisted families with locating specialized services in their area.

It's About You, LLC    Hot Springs, AR    April 2016 - July 2017  
RN Administrator

Duties: Direct Supervision of approximately 50 Caregivers in the Home Care setting. Performed Supervisory visits every 62 days on all clients. Worked with DHS to create and follow Person Centered Service Plan. Admission of all clients and developed Plan of Care. ARCHOICES. Personal Care.

Ouachita Job Corps    Royal, AR    February 2015- April 2016  
Center Nurse

Duties: School Nurse. Performed Sick Call, New Student Intake Processing, Family Planning, Member of Sexual Assault Response Team. Coordinated appointments with MD/APN, Dentist, Counselors. Student First Aid. Forest Service closed the Center and I lost my job.

Garland Nursing and Rehab    Hot Springs, AR    October 2014 – February 2015  
Floor Nurse/Night Shift

Duties: Administer medications, Documentation, Wound Care, Admissions, Discharges, Following MD orders, total care of the Long-Term Care resident.

Stagecoach Nursing and Rehab    Bryant, AR    April 2014 to October 2014  
MDS Coordinator

Duties: Complete detailed MDS Assessments for residents in Long Term Care and Skilled Nursing Beds. Write Plan of Care for all residents. Completed 703/780/787 forms Resident TB skin tests. Quality Assurance meetings. Standard of care meetings.

Corizon/Correct Care Solutions    Ouachita River Corrections Unit  
Malvern, AR    August 2012 – April 2014  
RN/Assistant Director of Nursing

Duties - Staff Nurse in 28 bed prison hospital. Total care of hospitalized inmates. Medical/Surgical. IV therapy. Medication. Blood transfusions. Wound vacs. Assessments. Walk ins. Code Blue situations. Peritoneal dialysis. Post-surgical care. Responsible for the supervision of a staff of approximately 30 nursing personnel.

**Sylvia Rather RN**



Evangelical Lutheran Good Samaritan Society                      Hot Springs Village, AR  
April 2012 to August 2012

Assistant Director of  
Nursing

Duties: Responsible for the supervision of a nursing staff of approx. 35 people. Duties: Recruiting, interviewing, hiring, discipline, termination, education. Admission of all new residents. Worked closely with MD/APN. Other duties as required by Director of Nursing.

SLC of Arkansas                      Hot Springs, AR    March 2011 to April 2012

Weekend RN/MDS Coordinator/Assistant Director of Nursing  
Services

Duties: Supervision of Nursing staff on the weekends to ensure compliance with state and federal regulations in Long Term Care facility. Later promoted to MDS Coordinator. Complete detailed MDS Assessments for residents in Long Term Care and Skilled Nursing Beds. Write Plan of Care for all residents. Completed 703/780/787 forms Resident TB skin tests. Quality Assurance meetings. Standard of care meetings. Later Promoted to Assistant Director of Nursing Services. Responsible for the supervision of a nursing staff of approx. 50 people. Recruiting, interviewing, hiring, discipline, termination, education. Other duties as required by Director of Nursing.

Murfreesboro Nursing Center  
Murfreesboro, AR

2008 - 2011

Medicare Manager

Duties: Complete PPS MDS Assessments for residents in Skilled Nursing Beds to determine RUG score. Write Plan of Care for all residents. Resident TB skin tests. Quality Assurance meetings. Worked with therapy department to coordinate care. Completed 703/780/787 forms. Other duties as required by the Director of Nursing.

Mine Creek Health Care  
Nashville, AR

2002 - 2008

MDS/Medicare Coordinator

Duties: Complete PPS and regulatory MDS Assessments for residents in Long Term Care and Skilled Nursing Beds. Write Plan of Care for all residents. Resident TB skin tests and flu vaccines. Quality Assurance meetings. Worked with therapy department to coordinate care. Completed 703/780/787 forms. Other duties as required by the Director of Nursing.

Dierks Health & Rehab  
Dierks, AR

2001 – 2002

Director of Nursing

Duties: Responsible for the supervision, leadership, recruiting and retaining nursing staff. Ensure federal and state regulations were followed. Completed MDS Assessments on all residents. Write Plan of Care. Quality Assurance meetings. Coordinate the care of all residents in the facility. Completed 703/780/787 forms. Other duties as required by the Administrator.

**Education**

**Sylvia Rather RN**



Associate Degree in Nursing  
National Park, AR  
LPN Red River Vo Tech

Garland County Community College  
Graduated 2001

Hot Springs

Hope, AR

Nashville High School

Graduated 1990

Nashville, AR

Graduated 1987

**References**

Celeste Spiers Sorrells  
Felicia Buckner  
Peggy Foster



# Tamesha Diane Chambers



December 2017

Bachelor of Science, Exercise Science  
Texas State University, San Marcos, TX

2008

Master of Health Systems Management  
Texas Woman's University, Denton, TX

2011

Master of Business Administration  
Texas Woman's University, Denton, TX

2011

## **Licensure:**

Registered Nurse, Texas - Expires 10/31/2020

## **Certifications:**

- SMQT.
- Basic Life Support Expires 6/2020.
- Advanced Cardiovascular Life Support 12/2020.

## **Work Experience:**

**Texas Health Resources, Dallas**

**October 2020 - Present**

**Registered Nurse (High Risk Antepartum)**

- Care for women during pregnancy who are experiencing complications or at risk for complications for herself or unborn child.
- Communicate plan of care with patients and families and provide education.
- Administer high risk medications such as magnesium, insulin, labetalol.
- Coordinate care with physician and other members of the healthcare team.
- Utilize external fetal monitoring and fetal strip interpretation.

**Hendrick Medical Center, Abilene, TX**

**October 2019 - October 2020**

**Registered Nurse (Labor and Delivery)**

- Communicate with patients, their families and medical team throughout birthing process.
- Critically think and communicate decisions with the patient and medical team.
- Empathize with patients and their families when outcomes are unfavorable.
- Practice sterile technique when in the operating room and performing sterile procedures.
- Audit charts, monitor policies and procedure to ensure AWHONN best practice standards are implemented.
- Capable of laboring patients, catching babies for nursery, circulating and scrubbing the OR, triaging OBED and working antepartum.

**Texas Health and Human Services, Abilene, TX**

**January 2019 - October 2019**

**Registered Nurse (Surveyor/Investigator)**

- Conduct on-site surveys and investigations of licensed and or Medicare certified health care facilities to determine compliance with applicable state and federal laws, regulations and rules.
- Analyze, compile and review complex, technical information derived from clinical record reviews, facility management and business record reviews, patient, consumer and facility staff interviews and onsite observations.
- Evaluates management, supervision and quality of care delivery.

- Determines the validity of the allegations in the complaint and compliance with state and federal regulations and documents survey and investigation findings in the Automated Survey Processing Environment (ASPEN).
- Reviews plans of correction submitted by healthcare facilities to determine acceptability.
- Develops recommendations for adverse state enforcement action and federal termination action if applicable and refers to other regulatory entities if appropriate.

**Parkland Health and Hospital System, Dallas, TX**

**January 2018 - 2019**

**Registered Nurse (Medical/Surgical)**

- Collaborate with other members of the healthcare team to plan, manage and provide care for 4-5 assigned patients on a 36 bed unit.
- Document in Epic all data related to patient care including assessment, interventions, medications, treatment and patient reactions.
- Continually assess and evaluate patients and contact the provider as needed.
- Experience with insulin and heparin drips, all tube feeds and psychiatric holds.
- Provide education to patients and family regarding diagnosis, treatment and plan of care.
- Serve as Safety Champion for the unit.
- Member of the Unit Base Committee.

**Spring ISD, Houston, TX**

**2013 - 2017**

**Math Interventionist**

- Ensure that students comprehend math concepts necessary to pass the EOC exam and be successful in future math courses.
- Conduct interventions utilizing individualized performance improvement plans tailored to the goals and targets of each student.
- Provides leadership and expertise to administration and math instructors for data analysis and adherence to improvement goals and scope and sequence adjustments.

# Teresa Radcliffe

## **Facility Survey Consultant - North Carolina Department of Health and Human Services**

Pine Level, NC

### Work Experience

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#### **Regional Clinical Consultant**

Choice Health Management Services - Claremont, NC

May 2019 to Present

Clinical nurse consultant with responsibilities for 5-7 buildings. Frequently visiting each community to complete environmental rounds and complete assessment of compliance with state and federal regulations. Education of community staff as needed. Interim DON as needed in the communities. Assisted in communities with Coved 19 out breaks.

#### **Director of Nursing (DON)**

Signature HealthCARE LLC - Kinston, NC

May 2018 to March 2019

Direct daily care. Educate staff as needed.

#### **Director of Nursing**

Watermark Retirement Communities - Tarboro, NC

March 2017 to May 2018

Led the nursing staff in providing excellent resident care. Provided education as needed. Completed QA duties, review of referrals, provided direct care as needed

#### **Facility Survey Consultant**

North Carolina Department of Health and Human Services

July 2014 to March 2017

2014 to Current

Division of Health Service Regulation/Nursing Home Licensure and Certification Section

Facility Survey Consultant

- Participate in annual CMS recertification surveys through the QIS process and investigated complaint intakes/allegations to assure compliance with state and federal regulations.
- Serve as team coordinator for QIS surveys on a rotational basis.
- Team leader for complaint investigations as needed.
- Completion of all findings, deficiencies associated with the surveys.
- Participation in Informal Dispute Resolutions.

#### **Nurse Consultant**

Principle LTC, INC - North Carolina

2013 to 2014

Nurse Consultant for up to 8 skilled nursing facilities in North Carolina.

- In addition to regional nurse responsibilities, worked special focus facilities at other company properties as needed.



- Completed compliance rounds, chart review to identify care or documentation issues, resident and/or family interviews to determine any care issues.
- Observed dining/kitchen staff to assure compliance with food preparation standards.
- Educated staff during 1:1 in-services as well as formal presentations for facility staff.
- Participated in the corporate QA committee.
- Submitted result reports for facility visits to the corporate Vice President of Nursing Services.
- Assisted and supported facility staff during state CMS surveys.

### **National Surveyor**

Ascellon Corporation

2012 to 2013

for State Veteran Homes

- Worked with a VA contract company providing surveys for State Veteran Homes across the USA.
- Inspected the long term care facilities to ensure compliance with Veteran Administration standards.
- Developed a statement of deficiencies for facilities when compliance was achieved before survey exit.
- Educated staff on VA standards and instructed on techniques to meet those standards as well as CMS regulations as applicable.
- Participated in IDR for the state of West Virginia.

### **Facility Surveyor Team Leader**

North Carolina Department of Health and Human Services

2009 to 2012

In addition to survey responsibilities, supervised 4 team members, maintaining a flexible schedule to include recertification surveys, follow up visits, and complaint investigations for 29 facilities in the assigned territory.

- Ensured that statements of deficiencies, complaint findings, and letters of acceptance were completed per regulations. Communicated with facility administration, residents and families as needed.

### **Facility Survey Consultant**

North Carolina Department of Health and Human Services

2006 to 2009

Participated in the investigation of skilled nursing homes during annual recertification surveys and complaint investigations.

- Identification of deficient practice using the Federal Medicare and Medicaid guidelines.
- Deficiencies and complaint findings were written based on the investigation findings.
- Participated in the Informal Dispute Resolution meetings requested by facilities.

### **Staff Nurse on Medical Surgical Unit**

Johnston Memorial Hospital

2004 to 2006

Functioned as the charge nurse for the 7:00 PM to 7:00 AM shift with duties that included admitting and assessing patients, providing medications, blood transfusions, and respiratory care.

- Assigned and supervised nursing assistants and licensed practical nurses as duties were performed.

### **Staff Nurse for Acute Care - Central Prison**

North Carolina Department of Corrections

2002 to 2004

Staff nurse and relief charge for a 50 bed acute care hospital within a men's maximum security prison.

- Duties included admission and on-going assessment of patients, medication/treatment administration, blood transfusion, and respiratory care for a unique population with a variety of medical problems.

### **Director of Nursing**

Cross Creek Health Care  
1999 to 2002

Responsible for management of clinical staff for this 80 bed skilled nursing facility. Supervised approximately 75 nurses and nursing assistants.

- Achieved a Deficiency-Free State Survey in first years as DON.
- Reviewed policies and procedures and ensured staff were following the policies through random observations and audits.
- Participated in the monthly/quarterly Quality Assurance Committee.
- Communicated with staff, families and residents on an on-going basis.
- Interacted with various physicians, consultants to ensure quality care for residents.
- Organized the evacuation of all 80 residents during the threat of hurricane.
- Reviewed and reconciled monthly orders for residents.

### Education

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#### **Associate in Nursing**

Beaufort County Community College

### Nursing Licenses

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#### **RN**

### Skills

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- RN
- Nursing Home
- Skilled Nursing
- Home Health
- Infection Control Training
- Nurse Management

### Certifications and Licenses

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#### **Certified in Infection Control**

Present

# Maria Theresa Henkel, RN



**Objective:** To provide and promote the deliverance of safe, quality patient care with high emphasis on customer service and professional nursing care.

## Highlights of Qualifications

- Extensive and varied experience in the nursing profession since 1980.
- Successfully prepared the hemodialysis unit for the JCAHO inspections.
- Successfully prepared Home Care unit for the Texas Department of Health/Medicare survey.
- Developed unit specific policies and procedures in accordance with the Standards of nursing practice, JCAHO and Medicare requirements.
- Certification in Nephrology Nursing 1993 (expired 1998).
- Conducted Federal and State Surveys for End Stage Renal Disease facilities and hospitals
- **Served, corroborated, & assisted with the State of Texas ESRD state Regulations update 2019**

## Professional Experience

### Staff Development

Developed unit specific job descriptions for staff RNs, LVNs, CMAs and dialysis technician  
Developed competency and skills checklists for staff  
Coordinated in-services for the training of case managers  
Coordinated the evaluation of new Hemodialysis machines, ACT monitors, new dialysis chairs and blood pressure monitors for the dialysis unit

### Management

Organized and facilitated the opening of a new Hemodialysis unit  
Managed post transplant clinic's daily operations  
Managed and directed the case management aspects of post transplant patients  
Developed, initiated, monitored, and evaluated Continuous Quality Improvement tools and program for the hemodialysis unit  
Liaison between hemodialysis, home health, post transplant clinic staffs, physicians, other units and departments in the hospitals and insurance companies  
Liaison between injured workers, employers, physicians and insurance companies

### Nursing Skills - Nurse Surveyor

Nurse Surveyor for End Stage Renal Disease Facilities and hospitals

> Performs Federal and State regulation surveys

## Maria Theresa Henkel, RN



- > Conduct on-site surveys and investigations of Medicare certified End Stage Renal Disease facilities to determine compliance with applicable federal laws and regulations.
- Determines the validity of the allegations in the complaint and compliance with federal regulations, and documents survey and investigation findings in the Automated Survey Processing Environment (ASPEN).
- Reviews plans of correction submitted by End Stage Renal Disease facilities to determine acceptability.
- Develops recommendations for adverse state enforcement action and federal termination action if applicable, and refers to other regulatory entities if appropriate.

The following demonstrated skills were past proficiencies and needed to be refreshed:  
Excellent assessment and documentation skills

Performed hemodialysis treatments, setting up, and troubleshooting of Continuous Renal Replacement Therapy (CRRT) machine  
Used the Cobe spectra machine for plasma pheresis, stem cell collection, red blood cell exchange, platelet depletions.

Performed photopheresis treatments with Therakos UVAR

### Achievements

**Successfully completed certified specialized training in: May 2, 2014 - Advanced Investigative Analysis , Advanced Investigative Report Development, and Advanced Interviewing**

CNN 1993 - 1998

Excellent Service Award from Kidney Foundation 1994

### Employment History

June 2014 - 2019 Contract Nurse Surveyor Oklahoma State Department of Health

June 2016 - 2017 Contract Nurse Surveyor New Mexico State Department of Health

Nov 2011 - present Nurse Surveyor IV Texas Department of State Health

Nov 2009-2011 Staff RN CKD/KLP Transplant UTSW clinic

May 2009 - Nov. 2009 Charge RN dialysis Davita

May 2007 - May 2009 Acute Care Coordinator RPNT Acute Services, Inc. (Dialysis)

May 2006 - Feb 2008 Apheresis RN Carter Blood Care, Apheresis

Apr. 2003 - 2006 Acute Care Coordinator RPNT Acute Services, Inc

## Maria Theresa Henkel, RN



Mar. 1999 – 2003	Acute RN	Fresenius Medical Care (Dialysis)
Aug. 1998 – 1999	Home Health RN	Gentiva
Aug. 1995 – 1998	Case Manager	ProResource Consulting Grp.
Sept. 1994 – 1995	Case Manager	Conservco
Sept. 1994 – 1995	IV Specialist	IMS (PRN)
Jan. 1993 – Sept. 94	Nurse Manager	Post Transplant Clinic Dallas Transplant Ins.
Jan. 1991 – Jan. 93	Nurse Manager	Acute HD Osteopathic Medical Center
Apr. 1989 – 1991	Nurse Manager	All Saints Hosp. Home Care
Apr. 1988 – 1989	Staff RN / PRN	Dialysis at Home
Sept. 1984 – 1988	Staff RN	John Peter Smith Hospital
Aug. 1981 – 1984	Staff RN	Northwest Hospital Chicago

### Education

St. Mary of Nazareth School of Nursing Chicago, Illinois 1978 – 1980  
Diploma Nursing

Truman College Chicago, Illinois 1976 – 1978  
Associates Arts and Sciences Degree

St. Sebastian HS Chicago, Illinois 1974 – 1975  
High School Diploma

Personal & Professional references available upon request.

## **Tiffany Knapil R.N., BSN, LE, CPT**



### **Qualifications**

- Licensed Registered Nurse (BSN)
- 2.5 years experience as a Healthcare Facility Surveyor
- 12 years healthcare sales and consulting experience
- Organized, self-motivator
- 8 years on site and virtual training and consulting experience
- 18 years remote/virtual office experience
- Excellent intrapersonal, negotiating and relationship building skills
- Engaging, experienced public speaker, presenter and educator

### **Education**

Bachelor of Science – Nursing – University of Pittsburgh, 1989

Graduated Cum Laude

Some graduate studies in Psychiatric Nursing – Temple University, 1995

### **Work Experience**

**California Department of Health, Chico, CA**

September 2018- April 2021

#### **Health Facilities Evaluator Nurse**

Primary Responsibility: Conduct inspections, investigations and surveys of health facilities for conformity with licensing and certifications of the California Department of Health and for compliance with state and federal regulatory laws and regulations. Activities include conducting and documenting interviews, observations and record reviews. Activities also include making a determination of facilities' compliance with state and federal laws and regulations based on survey findings and the preparation of written statements of deficiencies when deemed appropriate. Additional activities since March 2020- provide Covid-19 mitigation consultation to health care facilities.

**ISSA, Carpinteria, CA**

April 2018- August 2018

#### **Education Specialist**

Primary Responsibility: Provide students with online course information and assist with enrollment.

**Glo Skincare Studio & Day Spa, Pittsburgh, PA**

July 2015- September 2017

#### **Owner**

Owner operated successful wellness/day spa. Responsible for all business development, marketing, inventory management, accounting and day to day operations, including oversight of employees and independent contractors. Closed business due to move to California.

**Press Ganey Associates, South Bend, IN**

April 2008- Jan 2015

**Account Director, Provider Services (February 2012-January 2015)**

Primary responsibility: Grow revenue by selling patient experience survey and improvement solutions to physician practices and outpatient providers while minimizing cancellations from current client base.

Additional activities during employment in this role- Function as home health and medical practice expert for internal and external clients related to regulatory requirements and new business models for delivery of care. Assist marketing in developing marketing plan to increase sales and industry awareness of Press Ganey.

**Manager, Improvement Services (March 2010- February 2012)**

Primary responsibility: Develop and support a nine person team of improvement managers to insure healthcare clients find value and achieve ROI through delivery of patient experience improvement consulting services. Received recognition for managing top performing team out of six teams while receiving highest manager performance scores from my team members for all managers in the department. Additional activities during employment in this role: Developed new consulting solutions, tools and business models to streamline services, improve client ROI and reduce cancelation risks. Managed own client panel and provided onsite and webinar consulting services to them and other clients.

**Business Development Manager (April 2008-March 2010)**

Primary responsibility: Grow bottom line revenue and increase market awareness of Press Ganey services specific to the home care market

Additional activities during employment in this role-responsible for developing speaker bureau, client advisory council, submission of presentations to industry conferences. Function as home health expert for internal clients and business unit associates. Develop customized solutions strategies for home health, hospice and DME clients to utilize as customer service improvement tools. Assist marketing in developing marketing plan to increase sales and industry awareness of Press Ganey. Contribute to business unit vision development and achieving or surpassing business unit goals.

**Cerner BeyondNow, Kansas City, MO**

February 2006-April 2008

**Telehealth Program Manager/Learning Consultant**

Primary responsibility: Client training and consulting on software solutions (onsite and via webinar) also tasked with developing and managing successful Telehealth sales program.

Responsible for training and consulting on clinical functionalities of software solution. Responsible for telehealth program vision, development and sales process: including developing and achieving short term and long term program goals, managing third party vendor relationship, contract negotiations with clients and vendors, development of marketing materials, Cerner staff education and training and day to day program operation and reporting.

**Apollo Telemedicine, Falls Church, VA**  
**Regional Sales Manager**

March 2004-February 2006

Primary responsibility: Selling digital imaging and telepathology solutions to pathologists.

Developed prospect list from 2 to 15 accounts in first 6 months. Successfully closed deals within expected time frame. Actively closed deals while in the process of territory building. Experienced in cold calling, marketing, trade shows and other face to face client selling. Responsible for lead generation, product presentation, bid presentation and all aspects of selling. Developed marketing materials and direct marketing campaign.

**BeyondNow Technologies/ A Cerner Company, Overland Park, KS** September 2000-March 2004  
**Client Manager**

Primary responsibility: Selling IT clinical and billing solutions to home care agencies.

Experienced in cold calling, marketing, trade shows and other face to face client selling. Responsible for lead generation, product presentation, bid presentation and all aspects of selling. 180% of goal in first year. Additional responsibilities- developed client relationship management program that reduced client defections. Model was further developed to include an additional 6 client managers.

**Visiting Nurse Association of Luzerne County, Edwardsville, PA**

July 1999- April 2000

**Community Liaison.**

Primary responsibility: Increasing physician referral to the home care agency.

Developed and implemented marketing plans for two counties to increase physician and community referrals. Duties included appointment setting and face to face marketing to physicians in their offices. I also functioned as a community liaison. Monitored referral statistics and managed overall marketing program. Promoted agency services through public presentations and television appearances.

**Northeast Counseling Services, Nanticoke, PA**

April 1998- July 1999

**Community Outreach Nurse**

Primary responsibility: Increasing physician referrals to a psychiatric inpatient unit.

Promoted long term inpatient psychiatric services to physicians, social workers and other health care providers throughout eastern Pennsylvania. After one year, monthly referrals had doubled.

**First Hospital, Wilkes-Barre, Pa**

January 1998- July 1999

**Staff Nurse**

Primary responsibility: Providing psychological support and basic nursing care for up to twenty-six adolescents on a psychiatric inpatient unit.

Duties included collaboration with physicians, interdisciplinary staff and supervision of psychiatric technicians. Changed from full time status to per diem when I assumed the Northeast Counseling position.



**Visiting Nurse Association of Luzerne County, Wilkes-Barre, Pa August 1996-December 1997  
Community Outreach Nurse**

Developed and implemented marketing plans for two counties to increase physician and community referrals. Duties included appointment setting and face to face marketing to physicians in their offices. I also functioned as a community liaison. Monitored referral statistics and managed overall marketing program. Developed agency brochures, other marketing literature and press releases. Coordinated annual flu campaign. Centralized and managed an intake department of six staff. Left position for evening employment due to family need.

**Visiting Nurse Association of Greater Philadelphia, Philadelphia, PA May 1994-July 1996  
Community Outreach Nurse**

Developed and implemented a three county physician marketing plan to increase agency referral base. Marketed agency services to community and facility administrators. Functioned as intake nurse and hospice liaison.

**Citadel Home Health, Narberth, PA April 1993- May 1994  
Staff Nurse**

Provided in home nursing care to high risk maternal child health clients in North Philadelphia.

**Management Recruiters, Philadelphia, Pa January 1993- April 1993  
Account Executive**

Worked as an executive recruiter.

**Mercy Hospital, Wilkes- Barre, PA November 1989- December 1993  
Staff Nurse**

Provided nursing care to med surg, obstetric patients and to adolescent psychiatric patients.

**West Penn Hospital, Bloomfield, PA Post graduation-1989  
Staff Nurse**

Provided nursing care to obstetric patients

**Other Experience**

Skilled in use of SalesForce, CRM, Word, Excel, Power Point, Social Media and other desktop applications.

**References Available Upon Request**

## Tracye Howse



Summary: I have worked as a Registered Nurse for 33 years, I graduated from Southern Arkansas University- Magnolia in May 1987 with an Associate of Science in Nursing. I have worked in many areas of Nursing over the years, but Long-Term care is near and dear to my heart.

### Work History:

**12/27/09-12/21/16: Arkansas Department of Health, In- Home Services: Home Health and Hospice.**

Team Leader- Duties-home visits, scheduling all visits for Staff, ordering supplies, holding staff meetings for Union Co. Reviewing charts, writing plan of corrections. In August 2016 it was announced that the In-home services were to be sold. Eventually the In-home services were sold to Kindred Healthcare.

**11/1/15-11/30/17: Timberlane Health and Rehab.,** Nurse Manager Weekends- Attended to staffing, auditing charts, dealing with Employees, Residents and Resident families. I resigned when I accepted a position as a State Surveyor.

**12/22/16-12/02/17: Arkansas Dept of Health Union County Health Unit-** Providing immunizations, family planning services, WIC services. I was the Case Manager for Maternity Care, Sexually Transmitted Diseases, NBS (which covered measles, mumps, hepatitis, tick fever) and Family Planning.

**12/4/17-Present: Arkansas Department of Human Services,** RN Surveyor. SMQT certified, working throughout the state of Arkansas completing Annual, Complaint, Infection Control, and follow-up visits.

**12/23/20-Present: Certisurv,** RN Surveyor. SMQT certified. I Work Complaints, Focused Infection Control Surveys and Recertifications as needed.

### References:

Melissa Slaughter Nurse Manager, Training Coordinator for the Office of Long-Term Care, State of Arkansas

April Munn, Health Facility Surveyor, Office of Long-Term Care, State of Arkansas 954 Cherry Street, Perryville, AR 72126 (501)514-0696

Sylvia Rather RN Surveyor, Office of Long-Term Care, State of Arkansas, 11 Billstown Road, Delight, AR 71940 (501) 538-7891

Dianne Fish RN, Dept. of Health, 566 Porterville Rd, Sarepta, LA 71071

# Wendy Stanbro



## Summary

I want to work for a company that cares about its customers and its employees.

## Experience

### Career Highlights

\*RN Health Compliance Inspector

#### **Colorado Department of Public Health and Environment**

June 2016- present

Responsibilities include investigating complaints at nursing facilities, completing recertification surveys at nursing facilities, writing defensible citations

Skills: Excellent ability to identify deficient practice with regulations in nursing facilities.

\*RN

#### **The Suites at Parker**

February 2016 – May 2016

Evening Medication/floor nurse on LTC unit

Responsibilities include medication administration, wound care and treatments, Assessments/documentation.

Skills: Excellent Assessment Skills

\*RN

## **Life Care Center of Stonegate**

February 2013 - December 2015 (2 years 10 months) • Parker, Colorado

Primary day nurse for 20-25 residents on LTC unit.

Responsibilities include medication administration, wound care and treatments, G-tube/Foley Catheter/Colostomy care, IV administration, Assessments/ Documentation/ Admissions/ Discharges/ Post Hospitals. Communication with physicians, residents and families.

Skills: Excellent Assessment Skills

\*RN Daytime/Evening Relief Charge Nurse

## **Hildebrand Care Center**

September 2004 - February 2013 (8 years 5 months) • Canon City, CO

Supervision over 20+ nursing staff on day/evening relief shift for a 90+ bed skilled nursing facility. Responsibilities include communication with physicians, pharmacy and dietary consultants and therapy staff. Documentation / Assessments / Admissions / Discharges / Post Hospitals. Assist with nursing care, medication administration and wound care. Venipunctures and IV administration. G-Tube placement and care, Foley placement and care. Communication with residents and families. IDT meetings.

Excellent assessment skills. Care of Alzheimer's patients in a secure unit.

Scheduling appointments and treatments. Scheduling staff and assignments.

\*Assistant Director of Nursing

## **Cheyenne Mountain Care Center and Rehab**

June 2008 - August 2009 (1 years 2 months) • Colorado Springs, CO

Assistant Director of Nursing for a 159 bed skilled nursing/rehab facility and Unit Manager for 80+ LTC residents. Responsibilities included assisting with supervising 70+ staff, Assisting with the making and implementing of new policies and plans of corrections, Communication with physicians, pharmacy and dietary consultants, and therapists, QA / Audits of all charts with appropriate follow up, Infection control, Staff In-servicing,

Documentation/Assessments/Admissions/Discharges/

Post hospitals, Assist with nursing care and medication administration on the floor prn, Restraint assessments and reductions, Aims/Behavior monitoring/Psych review, Venipunctures, IV insertion/care, Wound assessments, Communication with residents and families, IDT Meetings, and Charge nurse prn. Scheduling staff and assignments.

Skills: Point Click Care, Excellent Assessment Skills

\*Director of Nursing

**Gore Nursing Center**

November 2002 - July 2004 (1 years 8 months) • Gore, OK

Director of Nursing for a 70+ bed skilled nursing facility. Responsibilities included supervising 50+ staff, Scheduling/In-servicing staff, Ordering supplies, Communication with physicians, pharmacy and dietary consultants, and therapists, MDS/Care plans, QA all charts, Infection control, Documentation/Assessments/Admissions/Discharges/Post hospitals, Assist with nursing care and medication administration on the floor prn, Restraint assessments and reductions, Aims/Behavior monitoring, Venipunctures, Wound assessments, Communication with residents and families, IDT Meetings, and Charge nurse prn.

\*MDS Coordinator

**Sun Bridge Park Rehab Center**

March 2002 - January 2003 (10 months) • McAlester, OK

MDS/Care plans, assisted DON with supervising staff and in-servicing, QA'ing charts, and IDT Meetings, assisted on the floor with medical care and medication administration prn.

\*Director of Nursing

**Wellington Hills Nursing Center**

June 2001 - March 2002 (9 months) • Eufaula, OK

Supervision over 50+ staff at a 72 bed SNF/ICF facility, Scheduling and in-servicing staff, Ordering supplies, Communication with all physicians, pharmacy and dietary consultants, and therapists, Inputting patient information into the computer, QA all charts, Infection control, Documentation/Assessment/Admits/Discharges/Post hospitals, Assist with nursing care on the floor prn, Communication with residents and families, and Weekend Charge Nurse.

\*RN Weekend Floor Supervisor

**Wetumka Nursing Home**

March 2001 - June 2001 (3 months) • Wetumka, OK

Supervision over LPN's and CNA's, Medication administration, G-Tube placement and care, Foley placement and care, Wound assessment and care, Venipunctures, General documentation, Behavior assessment, Admits/Post hospitals, Excellent assessment skills.

\*RN Field Nurse

**Healthcare Innovations Home Health**

January 2001 - June 2001 (5 months) • Henryetta, OK

Admits/Recerts/Post hospitals/Discharges with Oasis, Supervision over CHHA's, Case Conference, Discharge planning, Excellent assessment skills, Venipuncture/Wound Care/Medication administration and assessment.

\*RN Weekend Floor Supervisor

**Rainbow Terrace Nursing Home**

June 2000 - January 2001 (7 months) • Weleetka, OK

Supervision over LPN's and CNA's, Medication administration/G-Tube placement and care/Foley placement and care/Wound Assessment and care/Venipuncture, General documentation/Behavior assessment, Admits/Post hospitals, Excellent assessment skills.

\*Branch Supervisor/Case Manager

**Mays Housecall Home Health**

February 1999 - May 2000 (1 years 3 months) • McAlester, OK

Admits/Recerts/Post hospitals/ADR's/Discharges, Supervising over office staff, LPN's and CHHA's, Scheduling, Case conferences, Discharge planning, Excellent assessment skills, Venipuncture/Wound Care/ Medication administration.

\*RN Case Manager and Field Nurse

**Heartland Home Health**

July 1998 - September 1998 (2 months) • McAlester, OK

Admits/Discharges/Recerts, Supervision over LPN's and CHHA's, Scheduling, Case conferences, Discharge planning, Excellent assessment skills.

\*RN Supervisor/ Field Nurse

**Kiamichi Valley Home Health**

September 1997 - July 1998 (10 months) • Hartshorne, OK

Admits/Discharges, Supervision over LPN's and CHHA's, Case conferences, Discharge planning, Excellent assessment skills.

\*RN Case Manager

### **Southeastern Medical Home Health**

May 1996 - October 1997 (1 years 5 months) • McAlester, OK

Admits/Recerts/Discharges, Supervision over LPN's and CHHA's, Scheduling, Case conferences, Discharge planning, and Excellent assessment skills.

\*RN Float Nurse

### **Community Hospital Lakeview**

May 1995 - May 1996 (1 years) • Eufaula, OK

Shift Supervisor, Medical/Surgical floor, Outpatient surgery, Emergency Room, ICU

## **Education**

\*Connors State College

1991 - 1995

Associates of Science,  
Applied Associates of Science in Nursing.

## **References**

\*Monica Weatherly

Dietitian



Professional

\*Cati Jenkins

Social Worker

[REDACTED]

Personal

\*Jodi Fleetwood

RN

[REDACTED]

Professional

\*Peggy Smith

RN

[REDACTED]

Personal

\*Robin Brewer

[REDACTED]

Personal



## Resume

Name: Alisia Jearine Dunn, Registered Nurse

Address: [REDACTED]  
[REDACTED]

Telephone: [REDACTED]

Education: BSN (Bachelor of Science in Nursing) from Eastern Kentucky University, May 1994

Work History: August 2019 – present – Kentucky Office of the Inspector General (OIG) – OIG Nurse Regulator – responsible for training new staff

October 2016 – August 2019 – Kentucky OIG – Regional Program Manager (RPM) – responsible for management of the Southern Branch of the OIG; oversight of OIG Nurse Regulators who were responsible for training of staff; provided training to staff when changes occurred in the survey process.

September 2015 – October 2016 – Kentucky OIG – Quality Reviewer – responsible for reviewing documents (statements of deficient practice and plans of correction) to ensure the necessary information was present and the required criteria was met. Provided training to staff regarding the principles of documentation and sometimes one on one instruction for new staff regarding writing deficiencies.

June 2014 – September 2015 – OIG – Nurse Consultant/Inspector – responsible for completing assigned complaint and recertification/relicensure surveys; preceptor for new staff.

July 2007 – June 2014 – Commission for Children with Special Health Care Needs (CCSHCN) – Nurse Administrator – responsible for oversight of the Barbourville CCSHCN clinic.

December 2001 – July 2007 – OIG – Nurse Consultant/Inspector – responsible for completing assigned complaint and recertification/relicensure surveys; preceptor for new staff.

1999 – 2001 – Knox County Hospital – Staff nurse on the Labor and Delivery Unit and Newborn Nursery – responsibilities included care of mothers and newborn babies as well as teaching “Childbirth” classes to expectant parents.

September 1997 – 1999 – Marymount Hospital – Staff nurse on the Labor and Delivery Unit and Newborn Nursery - responsibilities included care of mothers and newborn babies, teaching “Childbirth” classes to expectant parents, and became a certified lactation counselor (CLC) and provided new mothers with support/education regarding breast feeding.

August 1995 – August 1997 – Flaget Memorial Hospital – Staff nurse on the Labor and Delivery Unit and Newborn Nursery.

May 1994 – August 1995 – Knox County Hospital – Staff Nurse on the Labor and Delivery Unit and Newborn Nursery.

## Cheryl W Romanow, RN

### EDUCATION

Armstrong State College, Savannah, GA, graduated with BSN  
Georgia Southern University, Statesboro, GA, 15 quarter hours completed toward MSN

### EMPLOYMENT

October 2019 to present *Quality Assurance Reviewer & Health Facilities Surveyor, CertiSurv, LLC., Columbia, TN*

August 2009 to January 2019 *Centers for Medicare and Medicaid Services, Dallas Regional Office  
Nurse Consultant, GS-13 series*

I currently work for the Dallas RO conducting LTC surveys for the states monitored by this RO (TX, NM, OK, AR and LA). I am QIS certified and the ASPEN/QIS technical lead for the Survey and Certification Division. I have worked closely with the QIS states in this region embedding with the SA teams during their annual recertification surveys and performing FOQIS surveys. Together with the SA IT personnel, we have found ways for the RO and SA computers to exchange information as needed during these QIS and FOQIS surveys. I have attended several training sessions with ASPEN and the QIES Technical Conference in Baltimore in 2010. I have always been willing to be flexible in scheduling my work travel to better serve the RO in a more cost effective way. I have opted, when feasible, to stay in an area to be able to back-to-back surveys to save on travel costs. I am also certified to survey ESRD and Hospitals.

2004-February, 2009 *Federal Contract Long Term Care Surveyor, Ascellon Corporation, Baltimore, MD, promoted to Senior Surveyor in May, 2008*

I worked on a contract with Centers for Medicare and Medicaid Services completing comparative surveys nation-wide. This involved following the State Operations Manual for the survey process and evaluating the facility services based on the federal regulations. The results of these surveys were entered into ASPEN in a deficiency report. I was team lead on these surveys >50% of the time. A comparative database was developed after the surveys to compare the results of the State Agency survey to the Federal Contract survey. I participated in conference calls with the Regional Offices and the State Agencies to discuss the findings of the surveys. I was called on to precept new surveyors and helped to develop guidelines for surveying, computer usage and investigative protocols for the teams.

2002-2004 *Utilization Review Specialist Alternative Care, CareFirst Blue Cross/Blue Shield, Baltimore, MD*

I worked as a UR Specialist for the Alternative Care unit – long term care, rehab, and pediatric hospitals. I was responsible for authorizing stays in these facilities based on need. I worked with the physicians at CareFirst in the event of a denial of services. I performed these duties telephonically.

1999-2001 *Facility Consultant I, Division of Facility Services, LTC, State of NC, Black Mountain, NC*

I worked as a surveyor/complaint investigator in Long Term Care/Licensure & Certification branch. I was responsible for onsite surveying as part of a team and independently, compiling deficiency reports in ASPEN (2567L and 2567B), participated in Informal Dispute

Resolutions as Chairperson as well as panel member, chaired committee responsible for redistribution of facilities in western North Carolina between 5 teams, put packets together for survey, coordinated surveys at times, and was named as member of "100 Hour Club" for the past 2 years (over 100 hours in facilities).

1986-1999 *Admissions Coordinator/Case Manager/Staff Nurse/Unit Clerk, St Joseph/Candler Health System, Savannah, GA*

I worked in various positions in both hospitals and home health division of health system. The last year of employment I was a Case Manager dealing with Medicare, Medicaid and private insurance companies for hospital admission and length of stay reimbursement. For the three years prior to that, I was an Admissions Coordinator for home health. I was responsible for admission assessments for eligibility for home health services, establishing a plan of care and creating a medical records file on the patient. I have experience in the acute care setting in orthopedics, neurology, urology and post surgery/procedure.

1976-1984 *Executive Secretary/Case Worker, Community Cardiovascular Council (CCC), Savannah, GA*

The CCC is a non-profit agency collecting data for the prevention of cardiovascular disease for the citizens of southeast Georgia. I coordinated blood pressure screenings in the community, secretarial functions, verified eligibility for participation in sliding scale fee based clinics, conducted public education seminars, collected data for statistical purposes, and was responsible for a quarterly newsletter.

## **COMPUTER SKILLS**

- Aspen software
- Microsoft Office
- Internet usage
- Developing step-by-step procedures for assorted computer functions (i.e., downloading upgrades and patches for ASPEN)

# DONETTA BALL



My personal goal is to work for an employer that fosters a healthy, safe, friendly environment for the individuals they serve and for their employees.

## EXPERIENCE

**JANUARY 2002 – PRESENT**

CABINET FOR HEALTH AND FAMILY SERVICES, OFFICE OF INSPECTOR GENERAL

**SEPTEMBER 2019 – PRESENT**

### **BRANCH MANAGER**

Manage a regional office responsible for regulating health care facilities in 42 counties. Duties include supervising staff to ensure federal and state mandate requirements are met for surveys and complaint investigations of health care facilities; conducting Quality Assurance reviews of statements of deficiencies, letters/communication to facilities, and facility plans of correction; communicating with providers and Frankfort Central Office staff regarding findings/progress; and issuing statements of deficiencies to facilities/providers. Additional duties include ensuring staff training is current, reviewing and triaging provider incident/accident reports for regulatory non-compliance and scheduling investigations as needed and obtaining/evaluating quality assurance data.

**FEBRUARY 2017 – SEPTEMBER 2019**

### **QUALITY REVIEWER**

Responsible for reviewing statements of deficiencies issued to providers to ensure quality and principles of documentation were met, reviewing plans of correction from providers to ensure federal and state mandated criteria were met and communicating any concerns to providers, and maintaining data for Quality Assurance.

**APRIL 2010 – JULY 2016**

### **HUMAN SERVICES SUPERVISOR**

Assisted the Regional Program Manager with managing the regional office that is responsible for regulating health care facilities in 42 counties. Duties included scheduling inspections/surveys, supervising staff to ensure compliance with federal and state regulations was maintained, reviewing and triaging provider incident/accident reports, reviewing statements of deficiencies issued to providers and providers' plans of correction, training new staff, reviewing documents/data for Quality Assurance, and communicating with providers and Frankfort Central Office staff regarding findings/progress.

JANUARY 2002 – APRIL 2010

**NURSE CONSULTANT/INSPECTOR**

Conducted inspections/surveys to ensure federal and state regulations were met for Skilled Nursing Facilities, Intermediate Care Facilities for Individuals with Intellectual Disability, Hospitals, Psychiatric Residential Treatment facilities, etc. Duties included conducted surveys/complaints/revisits, completing Statements of Deficiencies, and reviewing facility Plans of Correction, etc.

**EDUCATION**

DECEMBER 1996

**BACHELOR OF SCIENCE IN NURSING, EASTERN KENTUCKY UNIVERSITY**

International Honor Society of Nursing Sigma Theta Tau

**SKILLS**

- Federal Training/Certification for the federal requirements for Long-Term Care Facilities, Hospitals, Home Health, and Intermediate Care Facilities for Individuals with Intellectual Disability
- Computer skills-Word, Excel, Power Point, Aspen/Acts programs
- Strong Work Ethic
- Dedication
- Versatility
- Trustworthy
- Technical Writing

EF

# *Elise Foard, RN, BSN*

## *Professional Summary*

Hardworking Registered Nurse Manager with success leading a team of healthcare professionals. Proven leadership focused on increasing and enhancing the lives of the most vulnerable Arkansas residents. Highly skilled and enthusiastic professional with more than 15 years of experience managing operations in patient-centric medical settings. Develop and lead productive and efficient team. Goal-driven healthcare professional well-versed in recruiting, training and managing employees to provide exceptional resident services. Highly organized and hardworking with excellent planning and program management skills. Licensed Registered Nurse in AR (Multi-state Compact).

## *Work History*

### **Arkansas Office Of Long-Term Care - Registered Nurse Manager**

Little Rock, AR

04/2014 - Current

Responsibilities:

- Conducting and supervising complex regulatory compliance determinations for Long Term-Care Facility Medicare/Medicaid certification/recertification/revisit, complaint investigations, and focused infection control surveys.
- While utilizing my specialized knowledge gained through preparing and obtaining Surveyor Minimum Qualification Test (SMQT) certification in 2014; my ongoing involvement in applying Federal Regulations; my Registered Nurse training and clinical experience; my clinical knowledge of current standards of nursing practice; and my advanced understanding of Federal Regulations relating to Long-Term-Care Facilities, I am currently responsible for evaluating/supervising all categories of surveys, as well as assessing individual performance of surveyors conducting surveys.
- As the only surveyor in Arkansas who attended Aspen's technical training course for Long-Term-Care-Survey Process (software program currently used to conduct certification/recertification/complaint surveys), I provide Information Technology support to field and office staff members.

Functional Skills:



## *Skills*

- Employee Development
- Microsoft Office
- Written Communication
- Healthcare billing
- CMS regulations
- High level of autonomy
- Direct Patient Care
- Hospice and palliative care
- Federal/State regulatory compliance
- Precepting
- Care Plan Development
- Managing deadlines
- Case management
- Medical Records Management
- Strong clinical judgment
- Multitasking abilities
- Nursing staff management
- Policy updates
- Planning and scheduling
- Process improvements
- Patient and family advocacy

## *Education*

2006

**Hardin-Simmons University**

Abilene, TX

Bachelor of Science: Nursing

1991

- Advanced assessments of vulnerable individuals served by long-term health facilities for appropriateness of nursing and other health services.
- Facility surveys of all types via interview, record review, observation, and evaluation of the provision of patient care and other services.
- Interview staff members and residents/family.
- In-depth record review, to include but not limited to, personnel files, patient medical records, facility policy and procedures, patient care protocols, administrative records and committee minutes.
- Exercise professional judgment, apply regulations consistently and fairly, and maintain a professional demeanor throughout the entire survey process.
- Serve as a resource to other health facility surveyors and non-nurse program managers regarding nursing and other health related issues, as well as assisting with Information Technology support.
- Train, evaluate, orient, instruct, and mentor fellow surveyors.
- Monitor, manage, and evaluate those staff members who report directly to me.
- Managed infection control and critical incidents and made procedural changes and improvements

#### **Advance Medical - Registered Nurse, ICU**

Frisco, TX

12/2012 - 04/2014

Responsibilities:

- Assessed patients' condition and relayed vital information to appropriate attending providers.
- Planned and implemented patient care plans.
- Treated wounds and provided advanced life support.
- Assisted physicians in performing procedures.
- Observed and recorded patient vital signs.
- Ensured that ventilators, monitors and other types of medical equipment functioned properly.
- Collaborated with fellow members of the critical care team.
- Responded to life-threatening situations as a member of the Rapid Response Team.
- Provided education and support to patients and their families/loved ones.
- Administered medications via oral, IV and intramuscular injections and monitored responses.
- Provided direct patient care, stabilized patients and determined next course of action.
- Managed care from admission to discharge.
- Monitored patient condition, including interpreting and tracking EKG readings, identifying irregular telemetry readings and updating team members on changes in stability or acuity.
- Collaborated with physicians to quickly assess patients and deliver appropriate treatment while managing rapidly changing conditions.
- Collected blood, tissue and other laboratory specimens and prepared for lab testing.

**Texas State Technical College - West**

**Texas**

Sweetwater, TX

Registered Health Information

Technologist (RHIT): Health Information  
Technology

- Audited charts and reviewed clinical documents to verify accuracy.
- Advocated for patients by communicating care preferences to practitioners, verifying interventions met treatment goals and identifying insurance coverage limitations.

**Texas Department Of Criminal Justice - Registered Nurse Supervisor**

Abilene, TX

07/2007 - 05/2011

- Managed infection control and critical incidents and made procedural changes and improvements.
- Managed care from admission to discharge.
- Provided direct patient care, stabilized patients and determined next course of action.
- Administered medications via oral, IV and intramuscular injections and monitored responses.
- Evaluated healthcare needs, goals for treatment and available resources of each patient and connected to optimal providers and care.
- Collaborated with physicians to quickly assess patients and deliver appropriate treatment while managing rapidly changing conditions.
- Led successful team comprised of RNs, LPNs and ancillary staff.

**Texas State Technical College - Instructor/Program Chair**

Sweetwater, TX

01/1998 - 12/2004

- Developed and presented yearly program budget to full faculty and staff.
- Facilitated accreditation of the program through American Health Information Management Association.
- Supported student educational and vocational planning to help each optimize learning strategies and reap long-term career benefits.
- Contributed educational and practical expertise to help optimize training courses and boost student learning.
- Educated students on successful methods for performing medical coding and transcription techniques.
- Strived to continuously update course strategies and content based on current trends and technological advancements in healthcare.
- Assessed student knowledge levels and abilities with detailed assessments.
- Prepared and delivered lectures to students on topics such as pharmacology, medical terminology, and anatomy .
- Liaised with medical and nursing personnel to evaluate and improve teaching and nursing practices.
- Prepared and administered weekly examinations to test student skills.
- Maintained student attendance records and grades.
- Coached underperforming students to help meet clinical objectives



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## Kayla Harwell, MSW

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### Related Work Experience

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**Providigm, LLC, abaqis Trainer/Surveyor**

June 2017 – Present

Remote

- Complete compliance inspections for nursing facilities with contracted states throughout the U.S. to ensure they are complying with federal regulations
- Act as a team leader when conducting compliance inspections by leading conversations and ensuring the process is being completed correctly and timely
- Have been proven to be a strong writer and thorough investigator as evidenced by limited corrections to my deficiencies and compliments from our quality assurance reviewers
- Train nursing facility staff on the different components and how to utilize abaqis (a quality management software system to improve the care and services at nursing facilities)
- Complete online webinar trainings for nursing facility staff
- Assist nursing facilities with their Quality Assurance and act as a resource for abaqis and survey related topics

**State of Colorado, Health Facilities Compliance Inspector**

Jan 2016 – June 2017

Denver, CO

- Completed compliance inspections of nursing facilities in the state of Colorado to ensure they were complying by all federal and state regulations
- Completed audits with a team over the span of four days
- Performed investigations regarding complaints
- Wrote deficiency statements within seven business days
- Have been proven to be a strong writer as evidenced by limited corrections to my deficiencies and compliments from all supervisors
- Used the methodologies of observations, record review, and interviews to determine deficient practice
- Presented areas of possible noncompliance to the management team at the nursing facility
- Provided education regarding the regulations to providers and acted as a resource
- Survey Minimum Qualifications Test (SMQT) certified

**PowerBack Rehabilitation of Lakewood, Social Services Specialist II**

Jan 2015 – Dec 2015

Lakewood, CO

- Managed a caseload of approximately 30 patients with an average stay of 2 to 3 weeks
- Effectively used time management, organizational skills and prioritization to manage caseload
- Coordinated and facilitated the discharges of an average of 35-40 patients a month
- Completed self-audits on a weekly basis to ensure all documentation was complete and accurate
- Upon admission, completed a psycho-social assessment to anticipate needs at discharge
- Advocated for patient's rights and choices
- Helped patients and families achieve the safest discharge plan to set them up to succeed
- Facilitated care conferences and initiated discussions regarding patients who were unable to return home and were needing a higher level of care
- Set up home health services for patient's when they returned home
- Developed person centered care plans

**UnityPoint Health: Iowa Methodist Hospital, Social Worker**

June 2014 – Jan 2015

Des Moines, IA

- Assessed psycho-social needs of complex individuals to determine most appropriate and safest discharge plan
- Educated patients and families about skilled nursing facilities and insurance coverage
- Coordinated and facilitated skilled nursing placements for patients and provided smooth transition to the next level of care
- Completed PASRRs prior to transition to the next level of care
- Advocated for patient's rights and choices
- Collaborated with the interdisciplinary team on discharge plans
- Assisted patients with advance directives, Medicaid applications, and provide information on community resources
- Provided support to patients and families struggling with the inability to return home and must pursue placement
- Effectively used time management, organizational skills and prioritization of large caseload
- When needed, helped coordinate the committal of patients to Behavioral Health

**Western Home Communities, Social Worker**

Nov 2012 – Dec 2013

Cedar Falls, IA

- Completed quarterly, pay change, discharge, and Medicare assessments
- Completed psychosocial histories, mental status exams, and depression screens

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#### **Graduate Field Placement**

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**Edgewater, A WesleyLife Community, Social Worker Intern**

January – April 2014

West Des Moines, IA

- Completed psychosocial histories, mental status exams, and depression screens
- Coordinated discharge planning and completed paperwork
- Involved in care conferences with residents and families
- Completed follow-up phone calls with discharged residents
- Involved with interdisciplinary team meetings with WesleyLife Hospice and shadowing of their social workers
- Completed Hospice Social Work assessments
- Helped patients sign up to receive Medicaid services and gather the proper documents to submit
- Provided psychosocial support to residents, families, and patients through visits
- Participated in weekly Leadership and Medicare meetings

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#### **Education**

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**University of Northern Iowa, Cedar Falls, IA**

May 2014

*Master of Social Work*

*Concentration: Administration*

**University of Northern Iowa, Cedar Falls, IA**

May 2013

*Bachelor of Arts: Social Work and Psychology*

## **Lori A. Hobbs, RN**

**I. Objective:** A Registered Nurse (RN) Quality Assurance position that will allow me to utilize my extensive experience with long-term care regulatory requirements and review of provider compliance, as well as my organizational, communication, and time-management skills.

### **II. Experience**

#### **1. RN Supervisor – Quality Assurance (QA) Review and Enforcement – Arkansas Office of Long-Term Care (OLTC) – June 2021 to current**

Supervisor: Amanda Smith, RN, Nurse Manager

##### **Duties and Responsibilities:**

- Perform supervisory reviews of nursing home deficiencies.
- Perform employee evaluations for QA review section staff.
- Work closely with the Nurse Manager (my immediate supervisor in making determinations regarding enforcement measures, including civil money penalties, denial of payment, termination, etc. when facilities are cited for high level deficient practices.
- Completed all training modules on the Centers for Medicare and Medicaid Services (CMS) surveyor training website.
- Maintain current knowledge of disease processes, medications, and nursing standards of practice.

#### **2. RN Resource Compliance Auditor – Baptist Home Health QAPI – August 2020 to June 2021**

Supervisor: Cyndi Berryhill, RN

##### **Duties and Responsibilities:**

- Review OASIS assessments and plans of care for a diverse patient population, including Medicare and Medicaid beneficiaries.
- Communicate plans and any needed corrections to clinical staff.
- Complete targeted audits of clinician's documentation and adherence to CMS requirements and Baptist Health policies and procedures.
- Assist employer to remain in compliance with regulations and company policy.
- Participate in weekly case conferences with assigned teams, continuing education, etc.

#### **3. OASIS Review Specialist - Care IV Home Health – January 2020 to July 2020**

Supervisor: Paula Dyer, RN, QAPI Director

**Duties and Responsibilities:**

- Review all medical coding, OASIS assessments and plans of care for a diverse patient population ranging from newborn to geriatric.
- Communicate plans and any needed corrections to clinical staff.
- Complete targeted audits of clinician's documentation and adherence to Care IV policies and procedures.
- Assist employer to remain in compliance with regulations and company policy.
- Review trending reports and report findings and report to QAPI Director.
- Identify educational and corrective opportunities for clinical staff and communicate findings to QAPI Director.
- Participate in QAPI meetings, continuing education, etc.
- Provide education to staff in weekly case conferences.
- Other QAPI duties as assigned

**4. Arkansas Department of Human Services – Office of Long-Term Care (OLTC) from February 2002 to December 2006 and again from July 2007 to December 2019. During my many years with OLTC, I have served in the following positions:**

**a. Nurse Manager – Survey, Certification & Enforcement: July 2016 to December 2019**

Supervisor: Carol Shockley, Director

**Duties and Responsibilities:**

- Direct supervision of the RN Coordinator, RN Supervisors, Program Managers and other staff.
- Extensive quality assurance and performance improvement responsibilities.
- Long term care deficiency reviews and enforcement – utilized nursing experience and knowledge of federal and state requirements to review deficiencies cited against nursing facilities (SNF/NF), psychiatric residential treatment facilities (PRTF) and intermediate care facilities for individuals with intellectual disabilities (ICF/IID) and recommended enforcement measures per the State Operations Manual.
- Performed review and recommendations related to applications for civil money penalty grants.
- Provided supervision and guidance to surveyors during their investigations of serious complaints against long term care providers.
- Developed training plans for staff with performance issues and issued disciplinary actions, up to and including termination, per DHS policy and procedure when necessary.
- Communicated regularly with facility Administrators and owners, Medical Directors, other physicians, CMS officials, legislators, attorneys, and other individuals.

**b. Nursing Services Unit Manager Review Section: July 2010 – July 2016**

Supervisor: Judy Johnston, RN, Nurse Manager

**Duties and Responsibilities:**

- Per request of the hiring official for this position, I served as the acting/interim Nursing Services Unit Manager from June 1, 2010, when the position was vacated, until I was officially promoted to the position, which included supervision of Registered Nurses, provision of telephone guidance to Surveyors and performance of the other job duties assigned to this position, as well as continuing to manage my existing RN Reviewer caseload.
- Performed supervisory reviews of nursing home deficiencies.
- Performed employee evaluations for a team of Registered Nurses, Program Managers and Administrative Professionals; developed corrective action plans for employees who failed to meet the standards of their position, which resulted in improved performance.
- Conducted reviews of evidence submitted by providers to determine if previously cited deficiencies had been corrected; made recommendations to supervisor when onsite revisits were warranted, due to facility failures to provide adequate evidence of correction.
- Worked closely with the Nurse Manager (my immediate supervisor), as well as the Director of OLTC in making determinations regarding enforcement measures, including civil money penalties, denial of payment, termination, etc. when facilities were cited with high level deficiencies.
- Led the Review Section to achieve very high scores on annual reviews conducted by the Centers for Medicare and Medicaid Services (CMS) for the quality of deficiency citations and adherence to CMS deadlines and enforcement protocols.

**c. Registered Nurse - Reviewer, Survey and Certification Section  
July 2007 – May 2010 (also February 2002 to December 2006)**

Supervisor: Vicki Hinkson, RN, Nursing Services Unit Manager

**Duties and Responsibilities:**

- Filled in for my supervisor on multiple occasions (during vacations, medical leave, and absences from the office for work-related conferences).
- Reviewed medical records of nursing home residents to determine appropriateness of care and compliance with Medicare/Medicaid regulations.
- Reviewed deficiencies cited against long-term care facilities, such as nursing homes, human development centers and intermediate care facilities for individuals with intellectual disabilities, to ensure sufficient evidence was collected to justify citations.
- Revised deficiency reports if a lack of evidence was identified; forwarded final deficiency report to facilities within regulatory timeframes.

- Recommended enforcement proceedings, such as denial of payment, civil money penalties or termination from the Medicare & Medicaid programs when cited deficiencies caused or were likely to cause harm or injury to residents.
- Communicated enforcement recommendations to Centers for Medicare & Medicaid Services (CMS) Regional Office personnel and facility Administrators; also communicated verbally and in writing with attending physicians as needed.
- Communicated with facility Administrators and other facility personnel to obtain acceptable plans of correction for the cited deficient practices.
- Followed through on assigned facilities until compliance with Medicare & Medicaid regulations was achieved.
- Maintained current knowledge base of disease processes, treatments, medications, and clinical standards of practice to facilitate ability to identify compliance issues.
- Entered all pertinent information into local and national database, utilizing Windows-based software.
- Trained new review staff and conducted deficiency writing training for newly hired surveyors.
- Initially worked as a surveyor for the first 8 months of my employment and conducted annual surveys and complaint investigations of long-term care facilities.

**5. Chemotherapy Infusion Nurse - Myeloma Institute for Research and Therapy – Arkansas Cancer Research Center: December 2006 to June 2007**

Supervisor: Alan Heath, RN, MSN

**Duties and Responsibilities:**

- Supervised and provided guidance to Certified Nursing Assistants, Laboratory Technicians and other medical personnel as needed.
- Completed the required chemotherapy course and passed the final exam with a score of 96% to become chemotherapy certified.
- Completed orientation with excellent reviews from RN preceptor.
- Administered chemotherapy agents, blood products, antibiotics, and other medications, as ordered by the physician.
- Performed venipunctures for lab work and IV access.
- Provided central line care.
- Completed assessments on each patient to determine severity of adverse effects of chemotherapy, to facilitate individualized treatment and care. Entered all pertinent assessment information into electronic health record using Logician software.

**6. Home Health Case Manager RN - Visiting Nurse Association: 1998 – 2002**

Supervisor: Alex Rocker, RN

**Duties and Responsibilities:**

- Supervised Certified Nursing Assistants and managed the plan of care for services provided by the Interdisciplinary Team, including Physical Therapists, Licensed Practical Nurses, Occupational Therapists and Social Services professionals.
- Managed a large patient caseload and provided home-based, skilled nursing visits to homebound Medicare & Medicaid patients.
- Conducted head-to-toe assessments and provided wound care, enteral and parenteral nutrition and medication administration, venipuncture, urinary catheterization, injections and patient/family education on topics including Diabetes Management, HIV Prevention and Care, Cardiovascular Disease, Nutrition, Medication Therapeutic and Adverse Effects.
- Conducted new patient admissions and entered all pertinent information into OASIS software program, utilizing a laptop computer.
- Developed and implemented plans of care and communicated patient care needs to other members of Interdisciplinary Team.
- Identified need for Physical Therapy, Occupational Therapy, Speech Language Pathology services, communicated need to physician and arranged consultations.
- Selected by Supervisory staff to serve as Preceptor/Trainer for new Home Health RNs and LPNs

## **7. Registered Nurse – ICU, Medical Intensive Care Unit – Baptist Medical Center Little Rock: 1995 to 1998**

Supervisors: Ruthann Meacham, RN and Kenny Allinson, RN

### **Duties and Responsibilities:**

- Provided primary nursing services to critically ill patients, including head-to-toe assessments, care and management of patients requiring mechanical ventilation and endotracheal suctioning, titration and administration of critical intravenous medications, hemodynamic monitoring, and care of invasive arterial lines.
- Supervised and provided guidance to Licensed Practical Nurses, Laboratory Technicians, Certified Nursing Assistants, and other members of the Interdisciplinary Team in the performance of their duties.
- Conducted various Quality Assessment and Assurance activities, including review of physician, pharmacy and nursing documentation regarding parenteral nutrition and medication administration, audits of code blue documentation and development and implementation of a streamlined crash cart inventory process.
- Assisted with providing staff education activities based on education needs identified during QAA activities.
- Entered assessments, medication administration, and other pertinent data into the electronic and paper health records.

## **III. Education**

**Baptist School of Nursing**

## **Graduated with High Honors in 1994 and received RN Diploma**

### **IV. Other Experience, Achievements and Skills**

- Type approximately 60 wpm and quickly learn and become proficient with all Windows-based software programs. Experienced with multiple versions of Microsoft Office suite, Office 365, etc. as well as all Alpine / ASPEN software, including the Long-Term Care Survey Process (LTCSP) software.
- Extensive experience communicating on any level necessary, both verbally and in writing, in a diplomatic manner. Able to maintain a calm, professional demeanor while communicating in high-stress situations.
- Attended multiple Survey Executive Training Institute conferences with my Director at OLTC. Attended multiple other leadership and directors' meetings at the CMS Dallas Regional Office and CMS Baltimore Central Office. Presented oral reports to a group of 50+ state agency representatives and CMS Regional Office staff.
- Passed the Little Rock Cancer/Chemotherapy Course exam with a score of 96% in January 2007.
- Passed the Surveyor Minimum Qualification Test (SMQT) to obtain certification as a long-term care facility surveyor for the Centers for Medicare and Medicaid Services (CMS) – 2002.
- Philip Morris Scholarship – Awarded based on academic achievement in nursing school and instructor recommendation - 1993.
- Frances Lorraine Bowman-Fletcher Scholarship – For achieving the highest GPA in my Level I Nursing class of over 200 students - 1993.
- Second Effort Scholarship – for achieving one of the top ten GED scores in the State of Arkansas - 1991.

### **V. References**

Kathy Hartness, RN, former long-term care surveyor

Cell Phone: [REDACTED]

Email: [REDACTED]

Carol Shockley, former Director of OLTC

Cell Phone: [REDACTED]

Email: [REDACTED]

Frank GoBell, former Deputy Director of OLTC

Email: [REDACTED]



## Michelle R. Siegrist, BSN, RN

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### Summary

- Highly analytical, supremely detail-oriented nursing/business professional with over 15 years of combined regulatory, patient safety, performance improvement/quality assurance, and risk management experience
- Primary business objective is to utilize exceptional communication, organizational, interpersonal, and administrative skills in a healthcare-related support position

### Career Experience

#### CertiSurv - Quality Assurance Reviewer (December 2020 – present)

- Review documentation associated with health facility surveys, including proper application of principles of documentation and support for citations
- Finalize survey package for delivery to state agencies

#### Colorado Department of Public Health & Environment – Nurse Compliance Inspector – Occurrences (December 2015 – present)

- Act as resource, educator, and interpreter of licensure standards and federal regulations for service providers
- Analyze facts, evidence, and precedents to evaluate reports of potential violations by service providers
- Utilize experience and judgment to determine the adequacy of response and intervention by service providers
- Prepare publicly-available summaries of reported events that are clear, concise, and legally defensible

#### Colorado Department of Public Health & Environment - Nurse Compliance Inspector (May 2014 – December 2015)

- Surveyed long-term-care facilities operating under Medicare and Medicaid directives to obtain data on the quantity and quality of medical, administrative and social services provided by examining records and reports, interviewing physicians, administrators, employees and residents, and observing the quality of resident existence in the facility
- Prepared survey reports concerning the compliance status with state and federal regulations of a facility's services and living conditions, providing education to healthcare staff when needed
- Served on Informal Dispute Resolution panel

#### Children's Hospital of Colorado – RN Clinical Risk Management Coordinator (April 2013 – May 2014)

- Responsible for analyzing the human, organizational and system factors contributing to adverse events, working with the Risk Director and operational and medical leadership to identify and promote risk reduction strategies that promote patient safety and reduce risk exposure
- Served as an internal consulting liaison and resource for Patient Care Services, Pediatric Medicine, Surgical Medicine, Psychiatry, Pathology, Anesthesiology, Audiology, Rehabilitation Medicine and Diagnostic Imaging in clinical risk reduction initiatives
- Collaborated with the Patient Safety Department in the identification of Serious Safety Events (SSE's)
- Evaluated occurrences to determine if elements for state reporting and/or Safe Medical Devices Act reporting are met, respond to requests for administrative review of grievances, identify Potentially Compensable Events to include on the loss-run and manage settlement claims

#### Centura Health – St. Anthony & OrthoColorado Hospital – RN Patient Safety Manager (April 2012 – April 2013)

- Managed liability claims submission in collaboration with Centura Risk Management staff
- Coordinated and submitted yearly Clinical Risk Management Incentive Plan to sponsoring entity, including a risk management gap analysis and storyboards detailing improvement projects in the areas of employee, environmental, and patient safety
- Referred issues to the Medical Staff Office for peer review, credentialing, and coordinated investigative actions
- Managed the Patient Relations Department, responding to in-house, telephonic and mailed complaints and grievances, ensuring compliance with regulatory timelines for their handling

- Submitted post-investigative reports regarding medical device malfunction/misuse to the FDA
- Designed and implemented educational offerings to facilitate understanding and implementation of patient safety standards in the organization
- Developed and presented comprehensive reports to the Quality Board on occurrence rates, serious safety events, state occurrence reporting, Root Cause Analyses (RCA's), risk management items and patient safety goals

Centura Health – St. Anthony and OrthoColorado Hospital – RN Patient Safety Specialist (June 2011 – April 2012)

- Managed the occurrence reporting system, monitoring adverse events for appropriate follow-up and trends
- Reported serious adverse events to local and corporate directors and appropriate regulatory agencies
- Consulted with managers, directors and other staff to analyze data, identify variances from best practice and determine how to minimize risk and optimize patient safety
- Facilitated Root Cause Analyses and Critical Event Analyses for serious adverse events, developing action plans to correct the breakdown in systems/processes, mitigate potential and actual professional liability and reduce harm to patients and staff
- Trained staff to identify potential reportable events
- Oriented new staff regarding patient safety and risk management functions of the Patient Safety Department

Visiting Nurse Association (Denver, CO) – Performance Improvement/Quality Assurance Coordinator (November 2009 – June 2011)

- Provided support, education and consultation to clinical management on all regulatory compliance, including state licensure standards and CHAP accreditation standards
- Managed all complaint and occurrence reporting, including maintaining and updating logs, preparing and disseminating quarterly reports, analyzing data for trends and working with staff to implement improvements
- Assisted with policy and procedure development/review to ensure compliance with applicable regulations

Denver Health, Rocky Mtn Poison & Drug Center – Quality Control Nurse (February 2008 – June 2009)

- Triaged call center reports and performed quality control review of adverse event drug and product complaint reporting for Pfizer, ensuring the reports met FDA content requirements and submission deadlines
- Identified inaccurate/discrepant report information, trended data, and educated call center staff when needed

State of Kansas, Department on Aging – Health Facility Surveyor I (February 2004 – February 2008)

- Surveyed nursing homes and assisted living facilities operating under Medicare and Medicaid directives to obtain data on the quantity and quality of medical, administrative, and social services provided by examining records and reports, interviewing physicians, administrators, employees, and residents, and observing the quality of resident existence in the facility
- Prepared survey reports concerning the compliance status with state and federal regulations of a facility's services and living conditions, providing education to healthcare staff when needed

MCI WorldCom (Atlanta, Georgia) – Commissions Analyst (November 2000 – May 2002)

- Developed analytical tools in order to audit annual commission disbursements of \$9 million
- Aided conflict resolution between national sales and human resources departments in Europe, the Middle East, and Asia to ensure commission compensation accuracy for 700+ sales representatives
- Uncovered calculation detail systems error, saving the department over 5% in commission payout costs

Shepherd Center (Atlanta, Georgia) – R.N./Patient Care Coordinator (August 1998 - November 2000)

- Managed the health status of spinal-cord-injured patients and patients with neurological disorders
- Trained newly-hired nurses in patient care protocol and hospital policy as a Clinical Coach
- Assumed charge nurse duties in absence of clinical manager, supervising 4-5 nurses, 4-5 nursing assistants, and up to 32 patients

Education

- **Bachelor of Science in Nursing** at Kennesaw State University in Marietta, GA, 1998, GPA 3.43
- **R.N. Licensure** obtained in 1998; multistate license



**SANDY  
GOINS**



## SUMMARY

I have over 32 years experience working for a regulator agency and have primarily worked as a quality reviewer the last 4-5 years.

## SKILLS

Communication

Leadership

Coordination

Critical thinking

## EXPERIENCE

Nurse Consultant Inspector

London, KY

Office of Inspector General/ Apr 2018 to Current

Surveyed health care facilities to ensure they meet state and federal regulations. In 2019, moved to the Quality Reviewer position and currently review statement of deficiencies to determine they are written following the principles of documentation and state requirements. Also review plans of correction to ensure the required criteria is included in the plan.

Quality Assurance Reviewer

Fairmont, WV

Healthcare Management Solutions / Feb 2016 to Apr 2018

Reviewed completed statement of deficiencies for federal health surveys to ensure the principles of documentation were followed and they meet the contractors guidelines. Also had to meet timeframes to ensure the reviews were completed per the contractors directive.

Regional Program Manager

London, KY

Office of Inspector General/ Aug 2008 to Jul 2016

Manager of regional office (covering 42 counties) for the Kentucky State Survey Agency. Scheduled surveys and complaints for all levels of care including long term care, home health, hospice, ESRD, ICF/IID, etc. Reviewed enforcement and other statement of deficiencies, complaint plans, and complaint summaries.

Consulted and gave direction to surveyors daily. Referred immediate jeopardy or condition level findings to the agency's central office staff. Completed quality improvement reviews of statement of deficiencies and complaint summaries/packets and passed on findings for regional and state trainings.

Conducted monthly staff meetings and participated/presented training to surveyors. Used Microsoft Word and Outlook daily.

Assistant Program Manager

London, KY

Office of Inspector General/ Aug 2008 to Jul 2016

Assisted Regional Program Manager with scheduling surveys and complaint surveys for regional office covering 42 counties in Kentucky. Accompanied regional surveyors on surveys when needed for training purposes or if assistance needed with difficult surveys. Reviewed statement of deficiencies and assisted surveyors in completing statement of deficiencies.

Nurse Consultant Inspector - Regional Trainer

London, KY

Office of Inspector General/ Jan 2000 to Jan 2005

Training Coordinator for regional office for Kentucky State Survey Agency.

Provided training for new surveyors on the certified long term care survey process.

Accompanied surveyors on long term care surveys and provided one on one training on survey tasks and the process. Assisted surveyors in completing a statement of deficiencies. Served on state wide team and assisted with difficult surveys. Prepared and presented surveyor training.

Nurse Consultant Inspector

London, KY

Office of Inspector General/ Sep 1989 to Jan 2000

Surveyed healthcare facilities (Long term care, hospitals, home health, hospice, ICF/iID) for state and federal requirements. Wrote statement of deficiencies after survey completed.

## **EDUCATION AND TRAINING**

Associate of Science: Nursing

University of The Cumberlands May 1983

Williamsburg, KY

## Attachment 16

### SMQT Evidence

Please see evidence and certifications following this page.

**Lima, Jessica (CDPH-L&C-DO)**

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**From:** Baldwin, Barbara (CDPH-L&C-DO)  
**Sent:** Tuesday, October 30, 2007 6:02 PM  
**To:** Lima, Jessica (CDPH-L&C-DO)  
**Cc:** Broadwell, Rossana C. (CDPH-L&C-SJD); Frazier, Renita (CDPH-L&C)  
**Subject:** SMQT Results

Hi Jessica,

Congratulations you have passed your SMQT. You are now a federally qualified surveyor. Good job.

10/31/2007

Surveyor Minimum Qualifications Test Results

Candidate: TIMOTHY DENTON PICKENS

Surveyor ID Number: [REDACTED]

State/Regional Office: TENNESSEE

Date of Testing: MAY 23, 2018

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: PATRICK CAMPBELL  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: DECEMBER 8, 2003

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.





Surveyor Minimum Qualifications Test Results

Candidate: ADEWALE B N  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] LORADO  
Date of Testing: SEPTEMBER 5, 2019

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: ALETHA CAROL BIGHAM  
Surveyor ID Number: [REDACTED]  
State/Regional Office: OKLAHOMA  
Date of Testing: JULY 21, 2017

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: AMANDA M. SMITH  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: SEPTEMBER 30, 2010

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: ANNETTE CASH  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: AUGUST 26, 2008

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: APRIL MUNN  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: NOVEMBER 1, 2018

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: REBECCA HEATH  
Surveyor ID Number: [REDACTED]  
State/Regional Office: COLORADO  
Date of Testing: MAY 4, 2021

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test  
Module A Results

Candidate: BECKY M. RICHARDSON  
Surveyor ID Number: [REDACTED]  
State/Regional Office: GEORGIA  
Date of Testing: MARCH 2000

Your performance on the Module A indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test  
Module B Results

Candidate: BECKY M. RICHARDSON  
Surveyor ID Number: [REDACTED]  
State/Regional Office: GEORGIA  
Date of Testing: MARCH 2000

Your performance on the Module B indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test  
Module A Results

Candidate: BETSY BATES  
Surveyor ID Number: [REDACTED]  
State/Regional Office: Utah  
Date of Testing: November 5, 2001

Your performance on Module A indicates SUCCESSFUL COMPLETION.

Surveyor Minimum Qualifications Test  
Module B Results

Candidate: BETSY BATES  
Surveyor ID Number: [REDACTED]  
State/Regional Office: Utah  
Date of Testing: November 6, 2001

Your performance on Module B indicates SUCCESSFUL COMPLETION.

---



Surveyor Minimum Qualifications Test Results

Candidate: ELIZABETH TEBO  
Surveyor ID Number: [REDACTED]  
State/Regional Office: TEXAS  
Date of Testing: JUNE 20, 2017

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: CARLA ROBERTS  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: AUGUST 28, 2020

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.

Surveyor Minimum Qualifications Test  
Module A Results

Candidate: MARTIN CARRIE L  
Surveyor ID Number: [REDACTED]  
State/Regional Office: Kentucky  
Date of Testing: May 8, 2000

Your performance on Module A indicates SUCCESSFUL COMPLETION.

Surveyor Minimum Qualifications Test  
Module A Results

Candidate: LILLIE CLAY  
Surveyor ID Number: [REDACTED]  
State/Regional Office: North Carolina  
Date of Testing: January 13, 2003

Your performance on Module A indicates SUCCESSFUL COMPLETION.

Surveyor Minimum Qualifications Test  
Module B Results

Candidate: LILLIE CLAY  
Surveyor ID Number: [REDACTED]  
State/Regional Office: North Carolina  
Date of Testing: January 14, 2003

Your performance on Module B indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: CYN THIA NDEZ  
Surveyor ID Number: [REDACTED]  
State/Regional Office: CALIFORNIA  
Date of Testing: JUNE 21, 2019

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.





Surveyor Minimum Qualifications Test Results

Candidate: EDWARD ROTH  
Surveyor ID Number: [REDACTED]  
State/Regional Office: OKLAHOMA  
Date of Testing: AUGUST 12, 2005

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: ESTER LEVYASH  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NEW JERSEY  
Date of Testing: OCTOBER 4, 2018

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: GAY HENDERSON  
Surveyor ID Number: [REDACTED]  
State/Regional Office: OKLAHOMA  
Date of Testing: OCTOBER 8, 2009

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: GINA CAMPBELL  
Surveyor ID Number: [REDACTED]  
State/Regional Office: VIRGINIA  
Date of Testing: JUNE 23, 2015

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: HEATHER DEVOOGHT  
Surveyor ID Number: [REDACTED]  
State/Regional Office: KENTUCKY  
Date of Testing: JUNE 10, 2019

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: JENNIFER KOSAR  
Surveyor ID Number: [REDACTED]  
State/Regional Office: INDIANA  
Date of Testing: DECEMBER 6, 2016

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: JULIANE WARDELL  
Surveyor ID Number: [REDACTED]  
State/Regional Office: FLORIDA  
Date of Testing: NOVEMBER 6, 2015

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: KATE HEAT  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] UTH CAROLINA  
Date of Testing: OCTOBER 25, 2021

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.





Surveyor Minimum Qualifications Test Results

Candidate: KATHLEEN MCDERMOTT  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: APRIL 20, 2017

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: KATHY DRAKE  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: MARCH 11, 2008

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: KATHERINE BRIGHT  
Surveyor ID Number: [REDACTED]  
State/Regional Office: TEXAS  
Date of Testing: AUGUST 29, 2012

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: KIMBERLY GATES  
Surveyor ID Number: [REDACTED]  
State/Regional Office: TEXAS  
Date of Testing: FEBRUARY 17, 2004

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: LAURA JACOBSEN  
Surveyor ID Number: [REDACTED]  
State/Regional Office: KANSAS  
Date of Testing: FEBRUARY 24, 2011

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: LINDA JUMA  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: MARCH 28, 2006

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: MARGARET SON  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] LORADO  
Date of Testing: AUGUST 28, 2018

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.

**Richard, Melissa D (CHFS OIG)**

---

**From:** Samantha Frevel [REDACTED] >  
**Sent:** Wednesday, November 21, 2018 7:36 AM  
**To:** Klotz, Marilyn (CHFS OIG DHC); Richard, Melissa D (CHFS OIG)  
**Subject:** Re: Marilyn Klotz; SMQT Verification

Good Morning Marilyn and Melissa,

Below is proof that Marilyn completed and passed the SMQT. Please let me know if you have any questions.

Thank you,  
**Samantha Frevel**  
**Help Desk Technician II**  
**Hendall Inc.**

---

**From:** Lang, L. Celestina (CMS/CCSQ) [REDACTED]  
**Sent:** Wednesday, November 21, 2018 7:18 AM  
**To:** Samantha Frevel; Jones, Synora K. (CMS/CCSQ)  
**Subject:** RE: Marilyn Klotz; SMQT Verification

Hi Samantha,  
...SMQT verification found ... please see below. Celestina

LN	FN	ID	STATE	MODULE	PASS/FAIL	TEST DATE
Klotz	Marilyn	[REDACTED]	KY	BOTH	pass	03/10/2010

---

**From:** Samantha Frevel [REDACTED]  
**Sent:** Tuesday, November 20, 2018 7:47 AM  
**To:** Lang, L. Celestina (CMS/CCSQ) [REDACTED]  
**Subject:** Fw: Marilyn Klotz

Good Morning Celestina,

Would you be able to assist with obtaining proof of SMQT completion for Marilyn Klotz?

- \* Date of birth: [REDACTED]
- \* Surveyor number: [REDACTED]
- \* Date (month and year) of SMQT: 2/20/2010
- \* State in which the test was taken: KY
- \* Successfully passed both modules A and B? Yes
- \* Survey experience (first survey completed on (date) Brandenburg diagnostic center on 11/16/2009



- \* Date of last survey: 11/15/18
- \* Survey agency name: Kentucky OIG Northern Enforcement Branch
- \* Name of survey agency supervisor: Belinda Beard
- \* Consent to release found or not found information (email is fine, no formal document exists). (SEE BELOW FOR PERMISSION)

Thank you,  
**Samantha Frevel**  
**Help Desk Technician II**  
**Hendall Inc.**

---

**From:** CMS Training Help  
**Sent:** Friday, November 16, 2018 1:16 PM  
**To:** [REDACTED] Samantha Frevel  
**Subject:** Re: Marilyn Klotz

Type your response ABOVE THIS LINE to reply

---

**Melissa Richard**  
**Subject:** Marilyn Klotz

---

NOV 16, 2018 | 01:10PM EST

Original message

**Melissa** wrote:

- \* Date of birth: [REDACTED]
- \* Surveyor number: [REDACTED]
- \* Date (month and year) of SMQT: 2/20/2010
- \* State in which the test was taken: KY
- \* Successfully passed both modules A and B? Yes
- \* Survey experience (first survey completed on (date) Brandenburg diagnostic center on 11/16/2009
- \* Date of last survey: 11/15/18
- \* Survey agency name: Kentucky OIG Northern Enforcement Branch
- \* Name of survey agency supervisor: Belinda Beard
- \* Consent to release found or not found information (email is fine, no formal document exists). (SEE BELOW FOR PERMISSION)

Melissa D. Richard  
Training Development Specialist II  
Cabinet for Health and Family Services / Office of Inspector General

Division of Health Care / Training & Quality Assurance Branch

[REDACTED]

Confidentiality Notice: This email message, including any attachment, is for the sole use of the intended recipient(s) and may contain confidential information. Any unauthorized review, use, disclosure, or distribution is strictly prohibited. If you are not the intended recipient, please contact the sender by e-mail and destroy all copies of the original message.

From: Klotz, Marilyn (CHFS OIG DHC)  
Sent: Friday, November 16, 2018 1:08 PM  
To: Richard, Melissa D (CHFS OIG) <[REDACTED]>  
Subject: RE: SMQT

Yes, please forward to me as soon as you can, and I appreciate your help!

From: Richard, Melissa D (CHFS OIG)  
Sent: November 16, 2018 1:07 PM  
To: Klotz, Marilyn (CHFS OIG DHC) [REDACTED]  
Subject: RE: SMQT

Do I have your consent to release your information to us?

Melissa D. Richard  
Training Development Specialist II  
Cabinet for Health and Family Services / Office of Inspector General  
Division of Health Care / Training & Quality Assurance Branch

[REDACTED]

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From: Klotz, Marilyn (CHFS OIG DHC)  
Sent: Friday, November 16, 2018 1:06 PM  
To: Mitchell, Michelle (CHFS OIG) <[REDACTED]>  
Richard, Melissa D (CHFS OIG) <[REDACTED]>  
Subject: RE: SMQT

Full name at the time of testing:

- \* Date of birth: [REDACTED]
- \* Surveyor number: [REDACTED]
- \* Date (month and year) of SMQT: years ago

- \* State in which the test was taken: KY
- \* Successfully passed both modules A and B? Yes
- \* Survey experience (first survey completed on (date) no idea
- \* Date of last survey: 11/15/18
- \* Survey agency name: OIG Northern Branch
- \* Name of survey agency supervisor: Belinda Beard
- \* Consent to release found or not found information (email is fine, no formal document exists).

I have already contacted CMS. I was informed the State should have all these on-file !

From: Mitchell, Michelle (CHFS OIG)  
Sent: November 16, 2018 12:24 PM  
To: Richard, Melissa D (CHFS OIG) <[REDACTED]>  
Klotz, Marilyn (CHFS OIG DHC) <[REDACTED]>  
Subject: RE: SMQT

First survey completed Brandenburg diagnostic center on 11/16/2009

From: Richard, Melissa D (CHFS OIG)  
Sent: Friday, November 16, 2018 12:08 PM  
To: Klotz, Marilyn (CHFS OIG DHC) <[REDACTED]>>  
Cc: Mitchell, Michelle (CHFS OIG) <[REDACTED]>  
Subject: SMQT

If you can please supply me with the following for CMS, they may be able to assist us in obtaining your certification notice.

- \* Full name at the time of testing:
- \* Date of birth:
- \* Surveyor number:
- \* Date (month and year) of SMQT:
- \* State in which the test was taken:
- \* Successfully passed both modules A and B?
- \* Survey experience (first survey completed on (date)
- \* Date of last survey:
- \* Survey agency name:
- \* Name of survey agency supervisor:
- \* Consent to release found or not found information (email is fine, no formal document exists).

Melissa D. Richard  
Training Development Specialist II  
Cabinet for Health and Family Services / Office of Inspector General  
Division of Health Care / Training & Quality Assurance Branch



Surveyor Minimum Qualifications Test Results

Candidate: MARY MAAS  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: JUNE 2000

Your performance on the SMQT indicates SUCCESSFUL COMPLETION of  
PART A and PART B.



Surveyor Minimum Qualifications Test Results

Candidate: MELANIE BRADFORD  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: JULY 10, 2018

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: MELISSA R  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] LORADO  
Date of Testing: JULY 28, 2014

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: MELISSA SLAUGHTER  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: DECEMBER 14, 2016

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: MIRANDA NIXON  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: FEBRUARY 19, 2004

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.





Surveyor Minimum Qualifications Test Results

Candidate: MONICA BURNHAM  
Surveyor ID Number: [REDACTED]  
State/Regional Office: TEXAS  
Date of Testing: JULY 20, 2017

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: PATRICIA GONZALES  
Surveyor ID Number: [REDACTED]  
State/Regional Office: TEXAS  
Date of Testing: AUGUST 27, 2015

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.

*Notified  
by results  
7/20/02*

SURVEYOR MINIMUM QUALIFICATION TEST  
MODULE A RESULTS  
(Date of Testing: June 26, 2000)

- Notes:  
1=Successful completion  
2=Unsuccessful completion  
x=Survey areas in which further study is recommended

----- State/Regional Office=Arizona -----

Surveyor Name	Surveyor ID Number	Performance on Module A	Basic Surveyor Skills	Environmental Quality	Non-Nutritional Dietary
[REDACTED]	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-
HIGGS PAULA A	14754	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-

SURVEYOR MINIMUM QUALIFICATION TEST  
 MODULE B RESULTS  
 (Date of Testing: June 27, 2000)

Notes:

- 1=Successful completion
- 2=Unsuccessful completion
- x=Survey areas in which further study is recommended

----- State/Regional Office=Arizona -----

Surveyor Name	Surveyor ID Number	Performance on Module B	Quality of Care	Nutritional Dietary	Drug Therapy
[REDACTED]	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-
HIGGS PAULA A	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-
[REDACTED]	[REDACTED]	1	-	-	-



Surveyor Minimum Qualifications Test Results

Candidate: RACHELE RENEK KEMP  
Surveyor ID Number: [REDACTED]  
State/Regional Office: OKLAHOMA  
Date of Testing: JANUARY 31, 2020

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: RENEE CUMMINS  
Surveyor ID Number: [REDACTED]  
State/Regional Office: MICHIGAN  
Date of Testing: JULY 20, 2012

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: RHONDA RODRIGUEZ  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: JUNE 4, 2018

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: SEENA RED  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] LORADO  
Date of Testing: APRIL 21, 2016

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.





Surveyor Minimum Qualifications Test Results

Candidate: SHERRY L. SMITH  
Surveyor ID Number: [REDACTED]  
State/Regional Office: OKLAHOMA  
Date of Testing: AUGUST 12, 2005

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



**Oklahoma State Department of Health  
Protective Health Services – Long Term Care**

This acknowledges that

***Susan Gosney***

has passed the **Surveyor Minimum Qualification Test** required by the  
OSDH Long Term Care Division and is now recognized as a qualified

**Long-Term Care Surveyor**

by the State of Oklahoma Protective Health Services.

Date: 08/04/2003

A handwritten signature in black ink, appearing to read "Michael Cook".

Michael Cook, Director  
Protective Health Services - Long Term Care  
OK State Department of Health





Surveyor Minimum Qualifications Test Results

Candidate: SUSAN NEWLAND  
Surveyor ID Number: [REDACTED]  
State/Regional Office: OHIO  
Date of Testing: APRIL 4, 2014

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: SYLVIA RATHER  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: OCTOBER 25, 2019

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: TAMESHA CHAMBERS  
Surveyor ID Number: [REDACTED]  
State/Regional Office: TEXAS  
Date of Testing: JUNE 20, 2019

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.

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Surveyor Minimum Qualifications Test Results

Candidate: TERESA RADCLIFFE  
Surveyor ID Number: [REDACTED]  
State/Regional Office: NORTH CAROLINA  
Date of Testing: FEBRUARY 9, 2007

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: TIFFANY K  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] CALIFORNIA  
Date of Testing: JUNE 27, 2019

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: TRACYE SUMMERVILLE  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: JULY 10, 2018

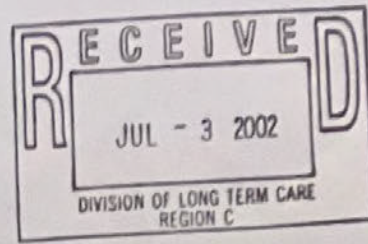
Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: WENDY STA  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] LORADO  
Date of Testing: JULY 10, 2017

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.

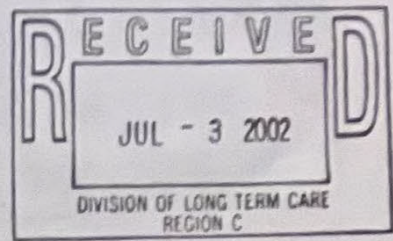


Surveyor Minimum Qualifications Test  
Module A Results

Candidate: ALISIA J. [REDACTED]  
Surveyor ID Number: [REDACTED]  
State/Regional Office: Kentucky  
Date of Testing: June 10, 2002

Your performance on Module A indicates SUCCESSFUL COMPLETION.

*Good Job!  
E. Wilson*



Surveyor Minimum Qualifications Test  
Module B Results

Candidate: ALISIA J DUNN  
Surveyor ID Number: [REDACTED]  
State/Regional Office: Kentucky  
Date of Testing: June 11, 2002

Your performance on Module B indicates SUCCESSFUL COMPLETION.

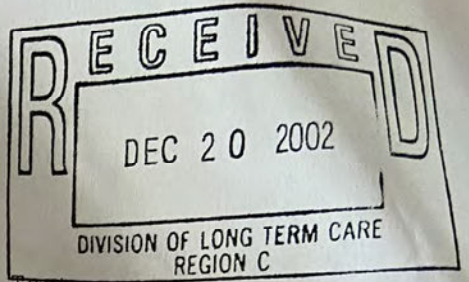
*Well Done!*  
*Ed Wilson*



Surveyor Minimum Qualifications Test Results

Candidate: CHERYL ROMANOW  
Surveyor ID Number: [REDACTED]  
State/Regional Office: CMS CENTRAL OFFICE  
Date of Testing: MARCH 22, 2004

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test  
Module A Results

Candidate: DONETTA ALLEN  
Surveyor ID Number: 1 [REDACTED]  
State/Regional Office: Kentucky  
Date of Testing: October 28, 2002

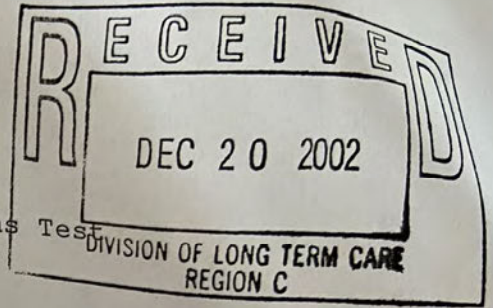
Your performance on Module A indicates SUCCESSFUL COMPLETION.

*Good Job!*  

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*Ed Wilson*

Surveyor Minimum Qualifications Test  
Module B Results



Candidate: DONETTA ALLEN  
Surveyor ID Number: [REDACTED]  
State/Regional Office: Kentucky  
Date of Testing: October 29, 2002

Your performance on Module B indicates SUCCESSFUL COMPLETION.

*Nice Work!*  
*Ed Wilson*



Surveyor Minimum Qualifications Test Results

Candidate: ELISE FOARD  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: OCTOBER 22, 2014

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: KAYLA HAR  
Surveyor ID Number: [REDACTED]  
State/Regional Office: [REDACTED] LORADO  
Date of Testing: NOVEMBER 23, 2016

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.





### Surveyor Minimum Qualifications Test Results

Candidate: LORI HOBBS  
Surveyor ID Number: [REDACTED]  
State/Regional Office: ARKANSAS  
Date of Testing: APRIL 2, 2003

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.



Surveyor Minimum Qualifications Test Results

Candidate: MICHELLE RENE SIEGRIST  
Surveyor ID Number: [REDACTED]  
State/Regional Office: KANSAS  
Date of Testing: JUNE 15, 2004

Your performance on the SMQT indicates SUCCESSFUL COMPLETION.

SURVEYOR MINIMUM QUALIFICATIONS TEST  
(SMQT) PRETEST RESULTS

Candidate: GOINS SANDY J  
Surveyor ID Number: [REDACTED]  
State/Regional office: Kentucky  
Date of Testing: December 7, 1992

Your performance on the pretest indicates:

Module A: No further testing is required  
Module B: No further testing is required

Please note: If no further testing is required, this indicates that you scored high enough on the pretest in that module to waive your participation in future administrations of the test.

If further testing is required you must participate in the SMQT testing process. Recommended areas of study, based on your pretest results, are outlined below. You are encouraged to review all content areas of the SMQT, paying particular attention to these subjects as you prepare for the next test administration.

DIAGNOSTIC FEEDBACK FOR MODULES

In Module A, the areas in which we suggest additional work are:

NONE

In Module B, the areas in which we suggest additional work are:

NONE