



# **CMS Long Term Care Update**

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**Division of Northeast Survey &  
Enforcement**

# Disclaimer

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# Overview of Discussion

Organizational Structure

Useful Resources

Revisions to Special Focus Facility Program

LTC Surveys

Nursing Home Staffing Campaign

# Survey and Operations Group

- Ensures providers and suppliers participating in the Medicare and Medicaid programs meet the minimum health and safety standards mandated by the Social Security Act.
- Conducts survey, certification, and enforcement activities, oversees the work conducted by the State Survey Agencies (SAs) in accordance with the provisions of their 1864 Agreements with CMS.

## **Vision**

*Ensure health, wellbeing, and quality of life for all Americans who rely on our health and long-term care system.*

## **Mission**

*To evaluate quality and enforcement minimum standards that lead to safer care through certification, survey, enforcement, and emergency support.*

## **Values**

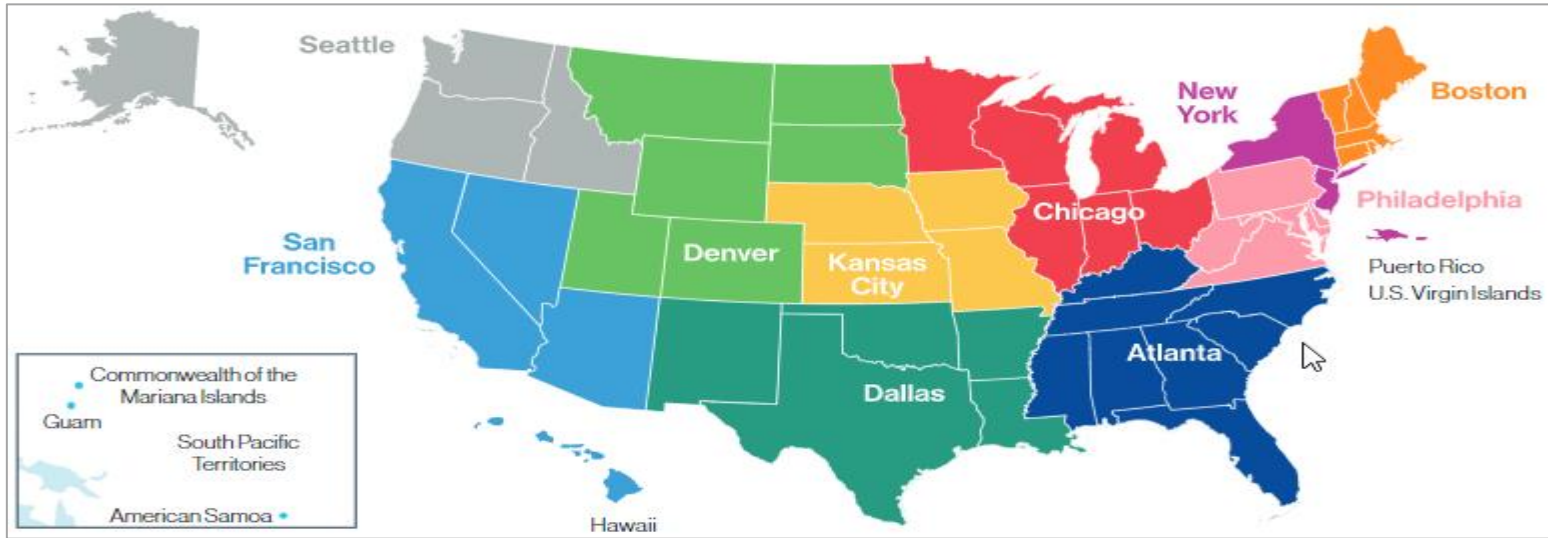
*We are purpose-driven*

*We are committed*

*We own our work and are accountable for our results*

*We value continuous learning, and policy and state-level knowledge and expertise*

# SOG Divisions and Locations



## 6 Divisions with 10 CMS Locations

[Northeast Division](#) – CMS Boston, CMS New York, CMS Philadelphia

[Atlanta Division](#) – CMS Atlanta

[Chicago Division](#) – CMS Chicago

[Dallas Division](#) – CMS Dallas

[Central Mountain Division](#) – CMS Kansas City, CMS Denver

[Western Division](#) – CMS San Francisco, CMS Seattle

# Northeast Division of Survey and Enforcement

Division of Northeast  
Survey & Enforcement

Director – Heather Lang

Acute & Continuing Care  
Branch

Branch Manager –  
Roxanne Rocco

Boston/New York LTC  
Survey Branch

Branch Manager – CAPT  
Hyosim Seon-Spada

Philadelphia LTC Survey  
Branch

Branch Manager –  
Andrea Hervey, Acting

LTC Enforcement  
Branch

Branch Manager – Yvette  
Banks

# Quality, Certification and Oversight Reports

<https://qcor.cms.gov/>



S&C QCOR

[Help](#) | [Resources](#) | [FAQs](#) | [Site Map](#)

## Tool

[Basic Search](#)  
[CLIA Laboratory Lookup](#)

## Accrediting Organization Performance

[Accredited Hospitals with Recent Substantial Deficiencies](#)  
[Reports of Hospice Complaint Surveys](#)

## Providers & Suppliers

### Multi-Provider Reports

[Ambulatory Surgical Centers \(ASCs\)](#)  
[CLIA Laboratories](#)  
[Community Mental Health Centers \(CMHCs\)](#)  
[Comprehensive Outpatient Rehab Facilities \(CORFs\)](#)  
[Dialysis Facilities \(ESRDs\)](#)  
[Federally Qualified Health Centers \(FQHCs\)](#)  
[Home Health Agencies](#)  
[Hospices](#)  
[Hospitals](#)  
[Intermediate Care Facilities for Individuals with Intellectual Disabilities \(ICF/IID\)](#)  
[Nursing Homes](#)  
[Organ Procurement Organizations \(OPO\)](#)

- [OPO Public Performance Report](#)
- [OPO Public Performance Report User Guide](#)

[Outpatient Physical Therapy/Speech Pathology \(OPT\)](#)

[Portable X-ray Suppliers](#)

[Psychiatric Residential Treatment Facilities \(PRTFs\)](#)

[Radiology Clinics \(RCLs\)](#)

## Welcome to S&C's Quality, Certification and Oversight Reports (QCOR)

### What's New on QCOR?

#### New Features

An additional survey type has been added to QCOR for the survey and deficiency reports. These surveys are referred to as *Infection Control* for nursing homes and *Special* for other provider types. These types of inspections look at specific healthcare areas related to infection control.

A downloadable Code of Federal Regulations deficiency tags guide is available in the Resources tab.

Also, users can now view information related to transplant programs under the Hospitals link on QCOR. There is additional information on transplant programs in the QCOR FAQs.

#### Home Health Agencies (HHA), Ambulatory Surgical Centers (ASC), and Hospices Information

Due to system migrations, HHA provider and survey information is only complete and accurate through May 19, 2021. ASC provider and survey information will only be complete and accurate through May 9, 2022. Hospice provider and survey information will only be accurate and complete through September 29, 2022. Information about specific enforcement actions related to HHAs, ASCs, and hospices remain available by request, under the Freedom of Information Act. CMS is working to update the QCOR website during the system migration.

#### Attention QCOR users

If you require assistance using the QCOR application, please contact the QCOR Help Desk. For email requests, please use [qcorhelp@innosoft.com](mailto:qcorhelp@innosoft.com).

[Accessibility Information](#), [CMS Privacy Policy](#), [Vulnerability Disclosure Policy](#)

# Quality, Certification & Oversight Reports

## Nursing Homes



S&C QCOR

[Home](#) | [Help](#) | [Resources](#) | [FAQs](#) | [Site Map](#)

### Search

#### Provider Reports

[Active Provider and Supplier Counts](#)  
[New Provider and Supplier Counts](#)  
[Terminated Provider Counts](#)

#### Survey Reports

[Overdue Recertification Surveys](#)  
[Recertification Survey Counts](#)  
[Survey Activity Report](#)  
[Frequency of Data Entry \(F4\)](#)

#### Deficiency Reports

[Deficiency Count](#)  
[Average Number of Deficiencies](#)  
[Citation Frequency](#)  
[Double G Citations Report](#)

#### Enforcement Reports

[Enforcement Actions](#)  
[Civil Money Penalty \(CMP\)](#)  
[CMP Tool](#)

#### Abuse Reports

[Abuse Citation Rates](#)

### Nursing Home Provider Reports

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The data in these reports, including provider and supplier counts and percentages, are valid for the subset of providers or suppliers for which there are survey records in CASPER.

[For More Information](#)

Beginning on July 31, 2024, deficiencies cited on more than one survey (i.e., standard, complaint, or infection control) on the same survey date for the same noncompliance are consolidated as one deficiency in deficiency count reports. Provider report pop-ups indicate all of the surveys that the deficiency (if any) was cited on in the last three columns.

Source: CASPER (03/08/2026)

[Accessibility Information, Privacy & Security](#)

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**Go To:** [S&C QCOR Start Page](#)

# Quality in Focus Trainings

Provider and Supplier Compliance Education Through Quality in Focus (QIF) Trainings

Short (10–15 minutes), Quality in Focus interactive videos tailored for specific provider types.

Skilled Nursing Facility/Nursing Facility (SNF/NFs):

- Treatment and Prevention of Pressure Ulcer Citations

- Free of Accident Citations

- Medication Error Citations

<https://www.cms.gov/files/document/qso-23-06-all.pdf>

# Quality and Safety Education Portal

<https://qsep.cms.gov/welcome.aspx>

Home

Help ▾

SADOC & SETI Training

CLIA Surveyor National Training

Public Access

Sign Up ▾

Login ▾

 1-855-791-8900



## Driving Healthcare Quality

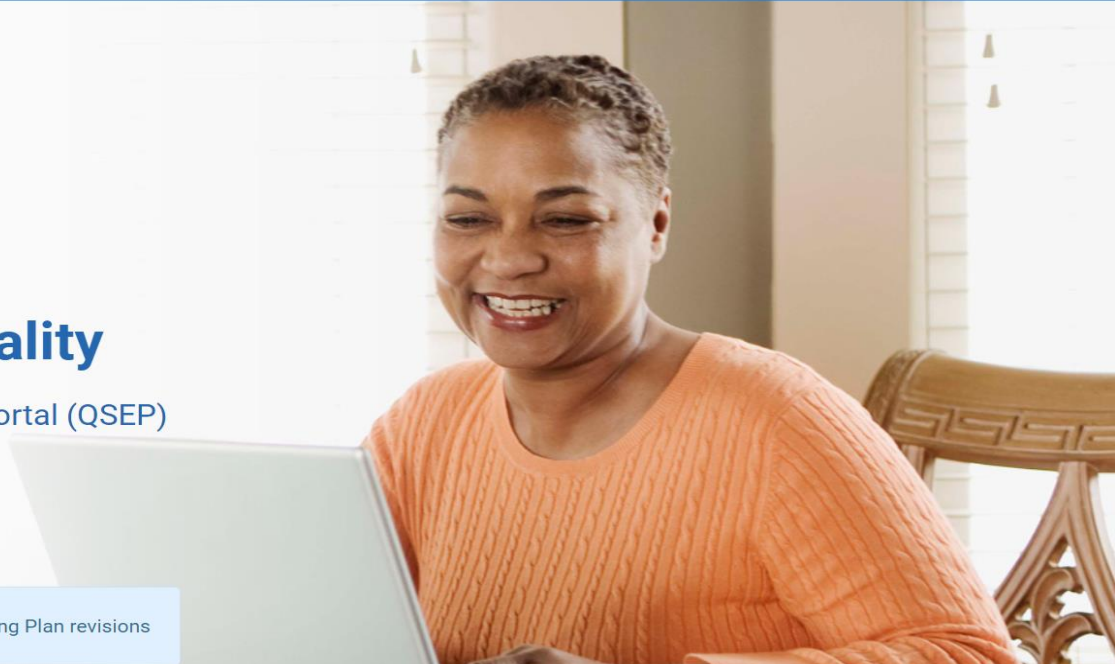
Welcome to the Quality, Safety & Education Portal (QSEP)

Login

Sign Up

Select here for public access to the Training Catalog

Select here for information regarding the Long Term Care (LTC) Training Plan revisions



# Revisions to the Special Focus Facility Program

- CMS is revising the focus area for selection to emphasize the prevalence of falls among the resident populations when considering SFF selection.
- In addition to health inspection scores, State Agencies may consider facility falls staffing data when selecting new SFFs.
- [www.cms.gov/files/document/qso-23-01-nh-revised-2026-01-28.pdf](http://www.cms.gov/files/document/qso-23-01-nh-revised-2026-01-28.pdf)

# Long Term Care Survey Process –Risk Based Survey

- CMS consistently strives to improve the effectiveness and efficiency of our nursing home oversight to protect residents' health and safety.
- CMS is testing a risk-based survey (RBS) approach that allows consistently higher-quality facilities to receive a more focused survey that takes less time and resources, while ensuring compliance.

# Nursing Home Staffing Campaign

## **Purpose**

Nursing home staffing is a critical factor for improving resident care and is the number one problem for nursing homes.

CMS has launched a Nursing Home Staffing Campaign (NHSC) to address workforce shortages in nursing homes and strengthen state oversight capacity nationwide.

The objective is to recruit more RNs and LPNs to work in nursing homes and state survey agencies, particularly in high-labor-shortage areas.

# Nursing Home Staffing Campaign, cont.

## Program Structure

CMS will award cooperative agreements to Financial Incentive Administrators (FIAs) to recruit nurses and provide financial incentives of up to \$40,000 in student loan repayment or a \$10,000 stipend in return for the nurse working three years in a qualifying nursing home.

Qualifying nursing homes will be facilities in high-labor shortage areas, to prioritize nursing homes that have the most difficulty hiring nurses.

We're working with states to identify these facilities and will publish a list of these facilities in the future.

# Nursing Home Staffing Campaign, cont.

## Timeline

CMS released a Notice of Funding Opportunity (NOFO) to award FIAs in early February 2026.

We anticipate FIAs will begin working July 1, 2026, set up their operations and start recruiting nurses in the fall.

The recruitment period will last approximately 18 months, followed by a three-year work commitment period.

This program will last five years.

Keep your eye on the CMS websites included here for updates.

# Nursing Home Staffing Campaign Resources

General NHSC information

<https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-general-information/nursing-home-staffing-campaign>

Recruit CNAs and highlight career pathways

<https://www.cms.gov/priorities/key-initiatives/nursing-home-careers>

Notice of Funding Opportunity

<https://simpler.grants.gov/opportunity/2b0aea3d-4706-4508-8a8f-ae605d033e0d>

Questions

[NHSC@cms.hhs.gov](mailto:NHSC@cms.hhs.gov)



**Questions?**