



SURVEYOR MINIMUM QUALIFICATIONS TEST (SMQT)

INTRODUCTION TO THE SMQT

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Introduction

The Omnibus Budget Reconciliation Act (OBRA) of 1987 and the Social Security Act, Sections 1819(g)(2)(C)(ii), 1819(g)(2)(E)(iii), 1919(g)(2)(C)(ii), and 1919(g)(2)(E)(iii) of the Act require that individual members of long term care (LTC) survey teams meet minimum qualifications established by the Secretary, including successfully complete a training and testing program. The purpose of this program is to ensure that surveyors have the minimum qualifications necessary to evaluate the compliance of LTC facilities with Federal requirements. In response to the OBRA 87 mandate, the Centers for Medicare & Medicaid Services (CMS) contracted with experts in test development to develop the Surveyor Minimum Qualifications Test (SMQT).

This introduction provides basic information about the SMQT so that you will know what to expect and be better able to prepare for the exam. Although it is important to study for the SMQT, remember that the exam is a minimum qualifications test. You do not have to be an expert in all areas to successfully complete the test. With a reasonable amount of preparation, most surveyors should be able to successfully complete the test.

The remainder of this introduction covers the following topics regarding the test:

- How the SMQT was developed
- What the questions are like
- How you should prepare for the test
- How the test will be administered
- Candidates with special test taking needs
- Strategies that will help you when you are taking the test
- How you will be notified regarding your test scores and what they mean for you

How the SMQT Was Developed

The SMQT was previously developed with the assistance of SA Directors and their representatives, as well as with the aid of Federal survey personnel. The first step was to identify the critical behaviors that surveyors perform on the job and the knowledge, skills, and abilities (KSAs) needed to perform those work behaviors. The next step was to develop a plan for the test based on those KSAs.

After the test plan was developed, test questions were generated addressing the KSAs in each module.

CMS may field test new questions; therefore, the test may also include unscored questions that are being field tested for use in future exams.

All surveyors who conduct LTC surveys must complete and pass the test in order to survey independently. The test focuses on the LTC facility, survey process, related laws, regulations, guidelines, environmental quality, sanitation, resident assessment and care plans, facility records, medicine, nursing, rehabilitation, gerontology, disability, chronic disease, resident rights, quality of life, nutrition, pharmacy, and infection control. The test also focuses on survey documentation, gathering and integrating information, deficiency determination, and scope and severity. There are 140 questions on the regular version of the test.

What the Questions Are Like

The SMQT is composed entirely of multiple-choice questions. The questions are all designed to measure

the kinds of KSAs that are needed to conduct an effective survey.

Some of these questions are straightforward knowledge questions. Other questions present survey situations and ask you to apply your knowledge to those situations, i.e., questions that describe a series of surveyor observations and ask about the best way to document a particular observation. **Your job will be to select the best, most correct answer to each question.**

There are a few examples of the kinds of questions on the SMQT and rationales for the correct answers to some of these questions at the end of this manual. These sample questions are illustrative only and are not exhaustive of the specific topics that may be included on the SMQT.

How You Should Prepare for The Test

The best way to prepare for the SMQT is to systematically review information on all of the KSAs and topic areas found in this manual. In particular:

- Thoroughly study the Federal Long-Term Care regulations and the State Operations Manual (SOM), Guidance to Surveyors of Long-Term Care Facilities, Appendix PP of the SOM, as well as the Psychosocial Severity Guide and the LTCSP – Procedures Guide. The regulations and Appendix PP are the foundation for all survey activity.
- Also, study areas relating to the clinical aspects of quality of care, medications, and nutrition. Focus on information that would help you do your job as a surveyor.
- Attend any SMQT training programs your State or CMS Location may offer.
- Form study groups with other surveyors to review the materials you have studied during your Basic Long Term Care Training, to discuss your interpretations of those materials, and to practice answering each other's questions on the material.

As with any preparation program, it is best to begin your efforts well in advance. This will allow you to determine the areas in which you need to study early enough so that you have time to acquire the needed knowledge or skills.

You are also more likely to remember information and be able to use it if you have reviewed it several times over a period of weeks. While your short-term goal may be to successfully complete the SMQT, you will find that the more thoroughly familiar you become with the regulations, guidelines, and clinical information used to conduct LTC facility surveys, the better you will be able to do your job and the more confident you will probably be as you approach the examination.

How the Test Will Be Administered

The Surveyor Minimum Qualification Test (SMQT) is an online exam which is available in the Quality, Safety & Education Portal (QSEP). The SMQT can be taken any time after completing all prerequisite courses and the Long-Term Care Basic Training course on the Long-Term Care (LTC) training plan.

The SMQT will be timed and will require 4 hours of testing time.



Surveyors are permitted to have either hard or electronic versions of the following resources while taking the SMQT.

- Chapter 7, State Operations Manual
- Appendix PP of the SOM
- LTCSP Procedure Guide
- Psychosocial Severity Guide
- Nursing Drug Handbook

When you are ready to start answering the examination questions, you will read each question as it appears on the computer screen. You will select the answer choice you think is correct or most accurate.

For example, suppose question number 140 reads:

140. The color that best describes a clear sky during the day is

- A. blue.
- B. white.
- C. orange.
- D. black.

After you select the answer, you can click the button to submit your answer or check the box if you would like to review this question at the end of the test. You will have the ability to go back and perform a one-time review of any questions that you mark for review. You must select an answer to the question before you can move forward to the next question. If you cannot review all the questions you marked for review, you can click “complete review” once. All the answers you have selected will be submitted.

You will be allowed to take breaks at any time you would like; however, the **clock does NOT stop** while you are taking breaks.

Candidates with Special Test Taking Needs

Candidates who have special test-taking needs due to a physical or mental impairment will receive accommodation consideration on an individual basis. The candidate must provide documentation that satisfies his/her supervisor that special accommodations are needed. The supervisor will then ask for approval from the CMS Location. Please note that it is considered fraud for an individual to report having a special need when he/she does not.

Strategies That Will Help You When You Are Taking the Test

There are several strategies you can use when taking the SMQT to help you do your best. The idea is not to "beat the test" but rather to make sure that you do not make foolish mistakes or run out of time.

Budget your time.

The SMQT will be timed, with timing beginning once you click the ‘start’ button on the test itself. Actual testing time is 4 hours. Most, if not all, surveyors will be able to complete the test within the given timeframes. After all, the purpose of the SMQT is to test your knowledge, not the speed with which you answer the questions.

To ensure that you are able to complete the SMQT within the time limit, you should budget your time carefully. At the beginning of the test, determine the approximate number of questions you will have to

answer each half hour of the test in order to finish in the allotted time. If you are using the ability to mark questions for review as you are answering them, you'll want to make sure you leave enough time for that **one-time** review. You should periodically check the time remaining to determine if you are still on pace to complete the SMQT before time expires. As a guide, on average, you should complete at least 35 questions an hour.

Work as quickly as you can without sacrificing accuracy for speed.

Maintain an active mindset.

Do not passively read the questions. Focus on your own answer to the question before reading the options. This will help to improve your concentration and your performance.

Give each question serious and thoughtful consideration and try to do your best on each one. Do not try to estimate your score as you go along. Estimating your score wastes valuable time, can increase anxiety, and may be totally incorrect.

Do not waste time on questions you cannot readily answer.

You will receive the same amount of credit toward your final score for each question you answer correctly regardless of how easy or difficult that question is for you or how long it takes you to answer it. It is, therefore, in your best interest to attempt to answer every question on the test. This may require that you not spend too much time on any one question. A strategy that may help you in this regard is to read through a question and answer it immediately if you know the correct answer.

If you are having difficulty understanding a question or determining the correct answer within a reasonable amount of time, select and mark what appears to be the most accurate answer. You must select an answer to the question and check the box for review before you can move forward to the next question. At the end of the test, you can review the questions that you marked for review one time before submitting your answers.

Read the directions and the questions carefully.

You do not want to answer a question incorrectly simply because you did not understand the directions or because you misread the question. It is up to you to read the questions carefully and to select the most accurate answer to each question.

Do not skim a question or the possible answers. Skimming may cause you to overlook important information. Pay particular attention to qualifying words such as NOT, EXCLUDING, and EXCEPT. These words are crucial in determining the correct answer. When answering these types of questions, remember to reverse your thought process and eliminate the alternatives that are true. Review all choices before answering a question because your job is to pick the best choice, that is, the most accurate choice, not just a good choice.

If you do not know the answer to a question, make the most accurate choice you can.

For difficult items, try one or more of the following approaches:

- Compare alternatives that seem to be correct, identify differences, and then refer back to the question to find the best answer.
- Eliminate choices that you know are wrong, select the best of the remaining alternatives, and move on to the next question.
- Review each alternative and determine whether it is true or false. This may help you to

reduce your selection to the best answer.

- Eliminate alternatives that are totally unfamiliar to you and select the best answer from the alternatives that remain.

By eliminating any clearly wrong answers, you improve your chances of choosing the correct response.

Rely on your initial response.

Do not second guess yourself and change an answer unless you have a good reason to believe that your original response was incorrect. Generally, your first response is your best response.

How You Will Be Notified Regarding Your Test Scores and What They Mean for You

A feedback report will be generated after completion of each test. This report will provide the following information: results of your SMQT (successfully or unsuccessfully completed) and content areas that you should consider further areas of study. You have a total of 3 attempts to pass the SMQT before the assessment is locked and a notification is sent to your RTA) or STC to develop an Individual Training Plan (ITP) to assist you with additional studies.

Knowledge, Skills, and Abilities (KSAs) Covered by the SMQT

A. Knowledge of the Long Term Care Facility, Survey Process, and Related Laws, Regulations and Guidelines

Knowledge of the Long Term Care Facility, Survey Process, and Related Laws, Regulations and Guidelines refers to knowledge of pertinent sections of the Code of Federal Regulations (CFR) and the State Operations Manual (SOM) as well as an understanding of when and how to use these resources to conduct surveys. It also refers to an understanding of the steps involved in planning, conducting, and documenting a long term care facility survey such as a working knowledge of the procedural instructions outlined in Appendix P, the regulations and guidance found in Appendix PP, and an understanding of how and where to document survey observations. A non-exhaustive list of sample topics includes:

- Statutes pertinent to Title XVIII §1819 and Title XIX, §1919 of the Social Security Act
- Code of Federal Regulations 42, CFR 483
- State Operations Manual, Appendix PP
- Other types of survey process, including complaint, re-visit and extended surveys

B. Knowledge of Factors affecting Environmental Quality and Sanitation

Knowledge of Factors affecting Environmental Quality and Sanitation refers to knowledge of how physical factors affect resident quality of life. This knowledge includes characteristics such as space, construction, sanitation, maintenance, ventilation, temperature, noise, and accident prevention. A non-exhaustive list of sample topics includes:

- Resident Call Systems
- Life Safety from Fire
- Emergency Power
- Space and Equipment
- Mechanical, Electrical and Patient Care Equipment
- Bathroom and Bedroom Specifications
- Building Exits

- Dining and Resident Activities
- Safe, Functional, and Sanitary Resident Environment
- Adequate Ventilation
- Pest Free Environment

C. Knowledge of Resident Assessment and Care Plans and Long Term Care Facility Records

Knowledge of Resident Assessment and Care Plans and Long Term Care Facility Records refers to knowledge of how to determine if the assessment and the comprehensive care plan address the needs of the resident. This includes ensuring the facility has conducted a comprehensive assessment, identified each resident's needs and developed a written plan of care based on the resident's current assessment. It also refers to knowledge of the information required in medical records and of the records used in planning, monitoring, and evaluating resident care. Included are general medical records (active and discharged),

medication and treatment records, and physician orders. A non-exhaustive list of sample topics includes:

- Care planning based upon initial and on-going comprehensive assessments
- Documentation of resident participation in their assessment process
- Current, written care plan for each resident
- Ongoing assessment, evaluation and updating of care plans
- Care plan problems and remedies reflected in program notes
- Knowledge of general principles and practices of medical record systems
- Electronic Health Records (EHR)
- Discharge planning

D. Knowledge of Medicine, Nursing, Rehabilitation, Gerontology, Disability, and Chronic Disease

Knowledge of Medicine, Nursing, Rehabilitation, Gerontology, Disability, and Chronic Disease refers to an understanding of standards of medical, nursing, and rehabilitation practice. It also refers to a basic knowledge of residents' physical and mental abilities, potential for rehabilitation, and care requirements. A non-exhaustive list of sample topics includes:

- Baseline care planning
- Pain Management
- Adequate treatment and progress notes
- Physical, speech-language pathology, occupational and respiratory therapies
- Positioning and assistive devices
- Range of motion and mobility
- Pressure sore prevention
- Bowel/bladder programs
- Dialysis
- Promotion of independence in activities of daily living
- Functional limitations
- Prosthesis
- Common diseases affecting the elderly such as Diabetes, COPD, CHF, CVA, CAD
- Common manifestations of disease processes
- Accident hazards
- Discharge Planning and Summary

E. Knowledge of Resident Rights and Quality of Life Issues

Knowledge of Resident Rights and Quality of Life Issues refers to an understanding of how long term care facility programs and practices affect resident rights. Also included is knowledge of how social services and activities can protect and promote quality of life and how these programs and services should be tailored to resident cognitive abilities. A non-exhaustive list of sample topics includes:

- Self-determination and a dignified existence
- Freedom from physical, verbal, physiological, and sexual abuse
- Choice of roommate and room assignment
- Right to have access to persons and services inside and outside the facility
- Right to manage personal finances
- Right to be informed in a language that is understood
- Resident involvement in decisions about care
- Resident security and privacy
- Respect for residents' personal property
- Freedom to exercise rights and register complaints
- Freedom from discrimination, cohesion and reprisal from voicing complaints
- Restraints

F. Knowledge of Nutritional and Dietary Service Principles and Practices

Knowledge of Nutritional and Dietary Service Principles and Practices refers to elements of the dietary services that affect nutritional adequacy. These elements range from staffing, menu planning, food preparation and distribution to therapeutic diets. Also included is an understanding of how resident choices and the dining experience may impact resident quality of life. A non-exhaustive list of sample topics includes:

- Menu planning
- Food preparation
- Sufficient, skilled staff to meet resident nutritional needs
- Dietary management credentials
- Food delivery
- Therapeutic diets
- Aesthetics of food delivery
- Recognition of food choice and provision for substitutes
- Record keeping of meal consumption
- Resident supervision and assistance, as required, with eating

G. Knowledge of Drug Therapies and Drug Administration Principles and Practices

Knowledge of Drug Therapies and Drug Administration Principles and Practices refers to an understanding of basic pharmacological practices including techniques of drug administration and distribution, drug classification, interactions/side effects, and basic human physiology as related to drug therapy and allergies. A non-exhaustive list of sample topics includes:

- Rules for determining medication errors as they relate to the medication pass
- Physician orders v. drug and dose administered
- Significant v. non-significant errors
- Use of psychotropic medications
- Drug regimen review
- Storage of medications
- Unnecessary medications

H. Knowledge of Infection Control Procedures

Knowledge of Infection Control Procedures refers to knowledge of Federal regulatory standards of infection control and of principles of acceptable professional practice. Included is the ability to apply applicable standards and principles for the evaluation of areas such as building maintenance, handling of linen, management of contaminated materials, and aseptic and isolation techniques. A non-exhaustive list of sample topics includes:

- Handling storage, processing and transportation of laundry
- Preventing, identifying and reporting infections and communicable diseases
- Antibiotic Stewardship
- Surveillance, Precaution and Transmission Procedures
- Standard precautions
- Infectious waste storage and disposal procedures
- Hand hygiene
- Aseptic techniques

I. Skill in Documentation

Skill in Documentation refers to skill in recording information factually, clearly, and objectively. Also included is skill in describing conditions and circumstances, documenting their direct relationship to a Federal regulation, and their effect on resident care. Examples of specific topics include:

- Creation of qualitative documents which answer who, what, when, where, and why questions
- Organized and logical presentation of facts
- Proper use of forms
- Ensuring supporting evidence is documented clearly and accurately

J. Skill in Gathering and Integrating Information

Skill in Gathering and Integrating Information refers to a proficiency in gathering information from a variety of sources and using an objective, systematic approach to evaluate if and how the information collected is relevant. It also refers to proficiency in noting usual and unusual circumstances in relation to residents and their environments. Included is skill in using all senses to assimilate information. It also refers to skill in eliciting necessary information, generating responsiveness, clearly articulating ideas, and evaluating response while maintaining an environment conducive to communicating with others. Also included is the skill required to communicate and interact with a variety of people, such as survey team members, residents' family members, facility staff, and facility administrators. A non-exhaustive list of sample topics includes:

- Integrating team members' observations and findings
- Identifying trends by combining information from interviews, record reviews, and observation
- Team leading/coordinating
- Communicating areas of concern to the team during team meetings
- Negotiating
- Establishing rapport
- Identifying pertinent information
- Achieving balance between focus and empathy
- Identifying areas to probe
- Active listening

- Nonjudgmental expression of ideas
- Professional demeanor
- Conflict resolution
- Recognizing when you need to gather additional information about a procedure/process or situation

K. Deficiency Determination and Scope and Severity

Deficiency Determination and Scope and Severity refers to consistent application of requirements when determining whether or not a deficiency exists, and if a deficiency does exist, what is the scope and severity of the deficiency. It also refers to the ability to analyze the written evidence of a deficient practice in order to determine the appropriate level of harm/impact and the prevalence of the problem.

Examples of specific topics include:

- Immediate jeopardy
- Actual harm
- Potential for harm that is more than minimal
- Informal Dispute Resolution (IDR)

SMQT Sample Questions

1. At a particular long term care facility, 98% of all organized resident activities are held between the hours of 11 a.m. and 6 p.m. Monday through Friday. The survey team should
 - A. recognize that the activity therapy staff only works Monday through Friday, 8 a.m. to 6 p.m.
 - B. interview residents to determine their satisfaction with the activities schedule.
 - C. suggest that the activity department provide structured, volunteer- run activities at night and on the weekends.
 - D. suggest that the facility offer transportation to local churches, theaters, and malls on weekends.

The correct answer is "B." Given the limited amount of information, the survey team should investigate further to gather additional information from residents, to learn about the impact on residents. "A" is incorrect because it reflects surveyor behavior that accepts facility practice without evaluating its appropriateness in relation to the needs of the residents. "C" and "D" are incorrect because they reflect surveyor behavior that presupposes the correct answer and provides "consultation" or suggestions based on limited information.

2. During an interview with Resident #4 , an 80-year-old female, she voiced a complaint that her hearing aid was broken and that even before it broke, she was not hearing very well with it. The most recent Minimum Data Set (MDS) assessment indicated the Resident had moderate hearing deficits. Based on this information, the surveyor should determine if the facility
 - A. made arrangements to have an audiology exam and the hearing aid repaired.
 - B. made arrangements to have a hearing specialist come to the facility to evaluate Resident #4's hearing.
 - C. asked Resident #4's family to arrange for her audiological examination and hearing aid repair.
 - D. was aware of Resident #4's missing hearing aid and, if so, what interventions the facility took to address or correct the problem.

The correct answer is "A." Resident #4 indicates that her hearing was impaired before her hearing aid broke. Although an audiological examination is needed to determine the status of Resident #4's hearing ability, it is not required that this examination be conducted at the facility.

3. To determine if a facility is in compliance with resident rights and quality of life requirements, surveyors should assess whether or not residents are given the opportunity to choose activities and schedules that are consistent with their:
 - A. likes, disabilities, and diagnoses.
 - B. medical histories, physician orders, and treatments.
 - C. mobility, medication regimens, and ability to pay for treatment.
 - D. interests, assessments, and plans of care.

The correct answer is "D."