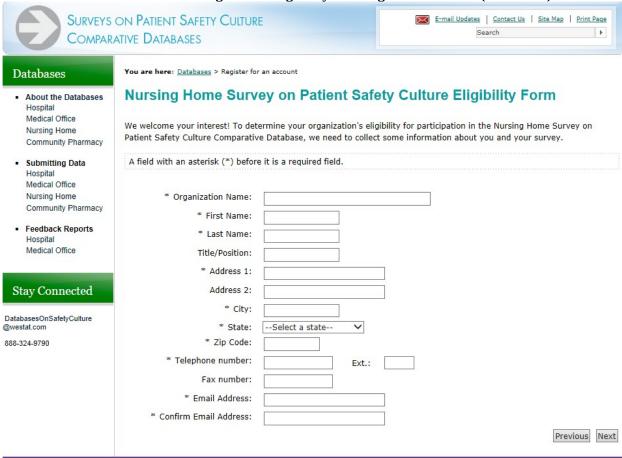
Attachment A: Nursing Home Eligibility and Registration Form

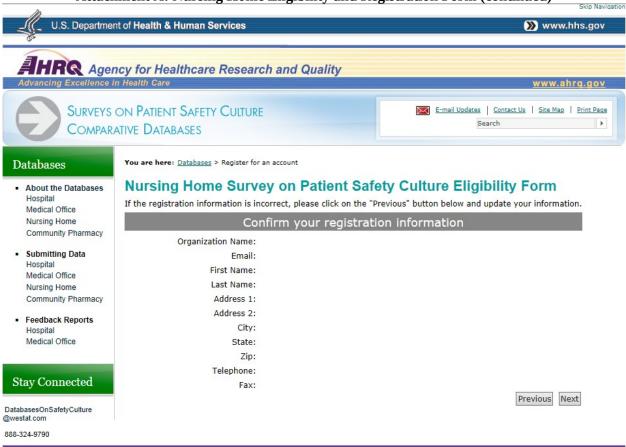
About the Databases Hospital Medical Office Nursing Home Community Pharmacy Submitting Data Hospital Medical Office Nursing Home Community Pharmacy Feedback Reports Hospital Medical Office	Nursing Home Survey on Patient Safety Culture Eligibility Form We welcome your interest! To determine your organization's eligibility for participation in the Nursing Home Survey Patient Safety Culture Comparative Database, we need to collect some information about you and your survey. A field with an asterisk (*) before it is a required field. * 1. Which of the following do you represent? Oursing home/Nursing home system/chain Quality Improvement Organization (QIO) An organization or vendor submitting data on behalf of a nursing home or nursing home system/chain Another type of healthcare organization (please specify) Please specify:	on
Stay Connected	* 2. Will you have completed survey data collection and be able to submit your final electronic data file	
DatabasesOnSafetyCulture @westat.com	by April 21, 2016?	
888-324-9790	O Yes O No	
	3 2 University and a second se	
	* 3. How many nursing homes will you be submitting for?	
	* 4. Did you make any changes to the AHRQ Nursing Home Questionnaire? Yes No No * If yes, please describe the changes (select all that apply) Added/Revised work areas Added/Revised staff positions Added items Removed items Modified wording of item text Modified response options Reordered the items Other (please specify) Please specify:	Next

Public reporting burden for this collection of information is estimated to average 3 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 540 Gaither Road. Room # 5036. Rockville. MD 20850.

Attachment A: Nursing Home Eligibility and Registration Form (continued)



Attachment A: Nursing Home Eligibility and Registration Form (continued)



Attachment A: Nursing Home Eligibility and Registration Form (continued)

