

Consumer Choice Website: User Instructions

THIS DOCUMENT WILL PROVIDE THE USER STEP BY STEP INSTRUCTIONS ON HOW TO SUCCESSFULLY REGISTER FOR THE WEBSITE AND COMPLETE THE QUESTIONNAIRE.

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Purpose of Questionnaire

The Illinois Department on Aging and the Office of the State Long-Term Care Ombudsman Program have developed a website for consumers to use when seeking a long-term care facility. The website meets the requirement of the Illinois Act on the Aging 20 ILCS 105/1) (from Ch. 23, par. 6101) (c-5). The intent of the website is to provide consumers with information about facilities in their preferred area regarding medical care, services and treatment, special services and amenities, staffing, facility statistics and demographics, ownership and administration, safety and security, meals, nutrition, rooms, furnishings, and equipment as well as family, volunteer and visitation provisions. The consumer will be able to filter their search based on location, needs, and preferences.

Facilities licensed under the Nursing Home Care Act (210 ILCS 45/2-214), the MC/DD Act (210 ILCS 46/2-214), and the ID/DD Community Care Act (210 ILCS 47/2-214) are all mandated to complete the electronic questionnaire provided by the Office of the State Long-Term Care Ombudsman. The questionnaire must be updated annually or when changes occur within the facility.

Protecting the Rights of Persons Who Live in Long-Term Care Facilities

Mandated by the Federal **Older Americans Act and the Illinois Act on the Aging**, the Long-Term Care Ombudsman Program protects and improves the quality of care and quality of life for residents of long-term care facilities in Illinois through individual and systemic advocacy for and on behalf of residents, including representing interests of residents before governmental agencies, reviewing and commenting on existing and proposed laws, seeking out and responding to media requests, the promotion and cultivation of best practices within long-term care services, and through the promotion of family and community involvement in long-term care facilities.

The Program is a resident centered advocacy program. The resident is the program's client, regardless of the source of the complaint or request for service. The Ombudsman will make every reasonable effort to assist, empower, represent, and intervene on behalf of the resident.

State Contact Information

DoIT Identity Management

Springfield: (217) 524-3648

Chicago: (312) 814-3648

TTY Support Line: (866) 277-5669

Email Support: DoIT.Helpdesk@Illinois.gov

Agency Relations: DoIT.AgencyRelations@Illinois.gov

DoIT Webmaster: DoIT.Webmaster@illinois.gov

State of Illinois Long-Term Care Ombudsman Program

Aging.SLTCOProgram@illinois.gov

Getting an Illinois.gov Account

Creating a New Illinois.gov Account

- To create an Illinois.gov account, click on the following link:
<https://www2.illinois.gov/sites/doit/support/Pages/DoITIdentityManagement.aspx>
- Click “**Create Illinois.gov Account**”



Introduction

Welcome to DoIT Identity Management (DIM). DIM is a self-service account management system that allows users to create an Illinois.gov ID and/or reset their Active Directory or Mainframe RACF account password.

Note: This system is intended for personal user accounts only. Technician and Administrative accounts should not be registered.

Identity Management Options

-  **Account Recovery Options**
Used to configure or change your password reset options. You will not be able to take advantage of self service password resets until these options are set.
-  **Reset your Password or Unlock your Account**
Used if you forgot your password, or need to unlock your account, and have already configured your password reset options.
-  **Create Illinois.gov Account**
If you do not already have an Account that is trusted by our systems, you can use this feature to create one for you.
-  **Identity Management FAQ**
Before calling for support, check out our Identity Management Frequently Asked Questions page for answers to common problems.

- Enter your email address for verification

After filling in the form and then clicking the 'Submit' button, a message should arrive in your inbox from **identityManagement@illinois.gov** containing an encoded link. Clicking that link will bring you back to this site to continue the registration process.

- Follow the instructions on the website and enter the requested information including a valid Illinois Driver's License.

Note: The license will be cross-referenced with the Secretary of State's Office. If the individual's address isn't up-to-date, the system will NOT consider the license valid.

- You will receive an email once your account registration is complete.

Resetting an Illinois.gov Account Password or Unlocking an Account

- To reset an Illinois.gov password, click on the following link:
<https://www2.illinois.gov/sites/doit/support/Pages/DoITIdentityManagement.aspx>
- Click **“Reset your Password or Unlock your Account”**

- Select **“External User”** in the Domain drop box
- Enter your Username
- Type the security code from the image into the box and click **“Continue”**

Encountering Problems

If you encounter any issues or problems while creating an account or resetting a password, please contact Department of Innovation & Technology (DoIT) Support by phone:

Springfield: (217) 524-3648

Chicago: (312) 814-3648

Or on the DoIT website:

<https://www2.illinois.gov/sites/doit/support/Pages/ReportAProblem.aspx>

Frequently Asked Questions (FAQ)

What is DoIT Identity Management?

DoIT Identity Management is a self-service account management developed by DoIT that allows users to create an Illinois.gov ID and/or unlock their account/reset a password without speaking to a Customer Service Center (CSC) representative. During enrollment, users will be prompted to answer a series of personal/security questions that are later used to verify identity during the password reset process.

Why do I have to provide personal information when setting up an ID?

Owning an Illinois.gov ID has legal ramifications and it is important to verify the identity of the individual obtaining the ID. Individuals will be prompted to provide personal information required for proper identification.

What happens to the information I provide?

The information provided will be used to validate your identity against various statewide systems. After your identity has been confirmed the following personal information will be stored:

- First Name, Middle Initial, Last name
- Email Address
- Password
- Agency or Company

Do I have to ever change my password?

Passwords are set to expire several times annually. Users will receive an automated email notification prior to password expiration containing password reset instructions. Contact the [Customer Service Center](#) if you require assistance with your password and/or account.

What do I do if the system is unable to verify my Driver's License information with the Illinois Secretary of State?

Verify that the information has been entered accurately and exactly as it appears on your driver's license. Examples: If your driver's license contains only a middle initial or if you have a hyphenated last name, the information must be entered exactly as it appears on your current license. Also check to ensure your license is not expired or suspended. If you have problems during the registration process and are unable to create an ID, an Enterprise Service Request (ESR) will need to be submitted by DoIT support staff.

What if I do not have an Illinois Driver's License?

Individuals who do not have an Illinois Driver's License are not eligible to register via the automated system. An Enterprise Service Request (ESR) will need to be submitted by DoIT support staff.

What if I'm unable to create an ID through the automated system?

If you are unable to create an ID through the automated system, contact your state entity resource in the State Contact Information section in this user manual on page 2.

Logging-On the Consumer Choice Website

Note: An Illinois.gov account is required to access the website. If you do not have an Illinois.gov account, please follow the prior instructions “Getting an Illinois.gov Account” on page 3.

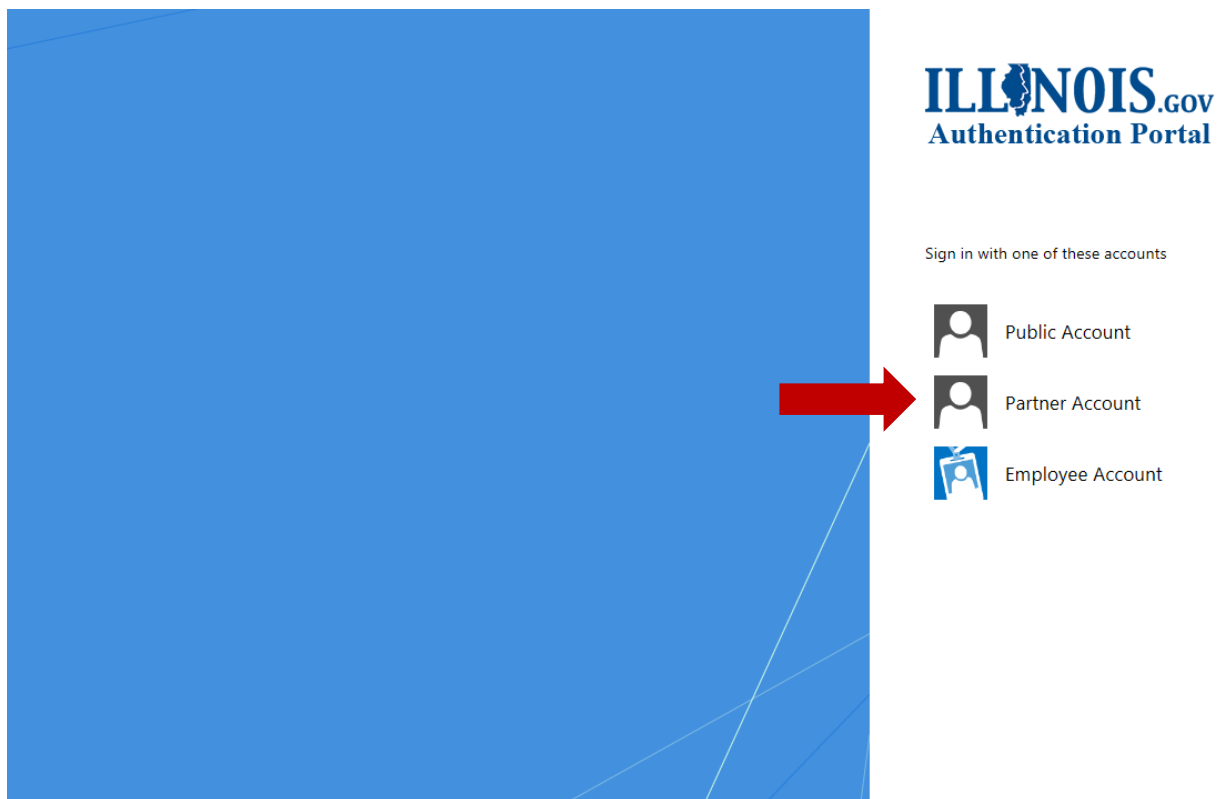
The URL for the administrative side of the Consumer Choice Website is:

<https://webapps.illinois.gov/AGE/OmbudsmanConsumerChoice/>

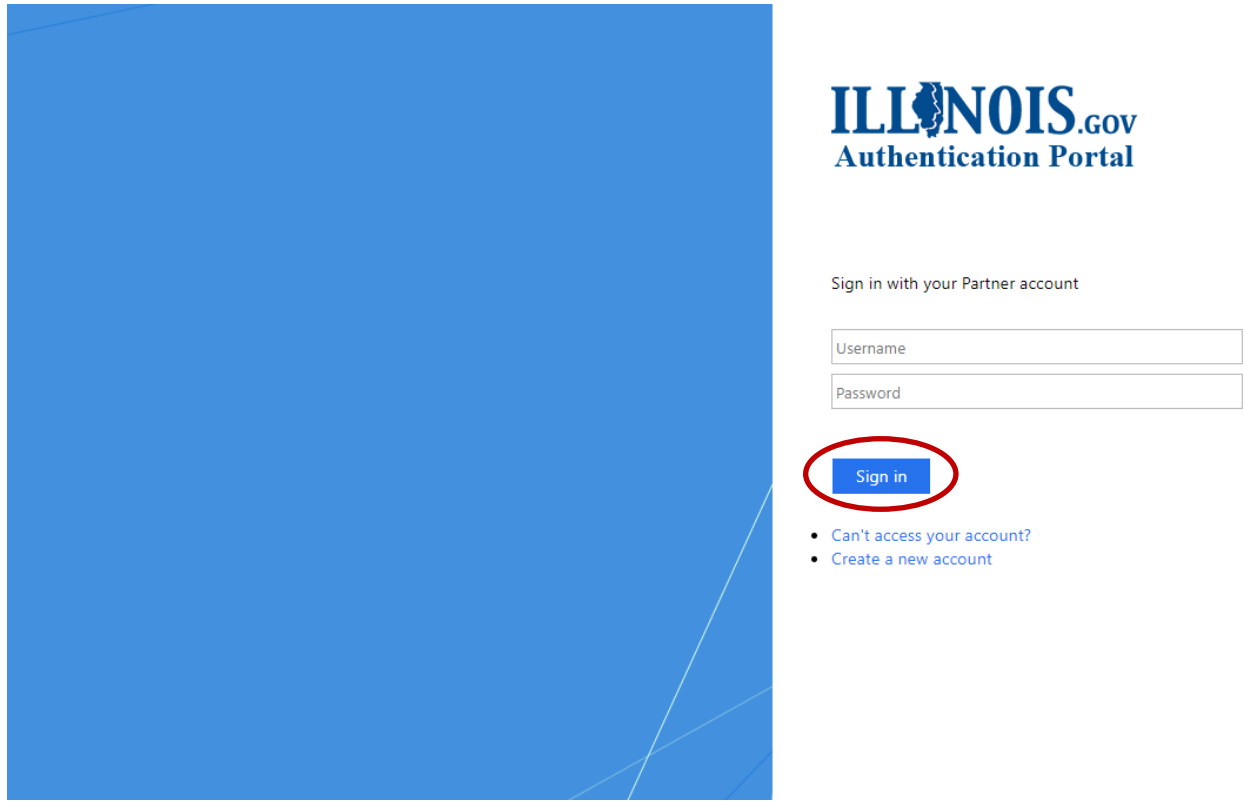
When you enter the web-address above (or follow the link if this is an electronic version), you will be directed to the Illinois.gov Authentication Portal.

This is the section where you will need your Illinois.gov Username and Password.

- Click “**Partner Account**” on the Illinois.gov Authentication Portal screen.



After clicking Partner Account, you will be directed to the Sign-In screen:



ILLINOIS.gov
Authentication Portal

Sign in with your Partner account

Username

Password

Sign in

- [Can't access your account?](#)
- [Create a new account](#)

- Enter your Username (**example:** john.smith@illinois.gov).
- Enter your Password.
- After you have entered both your Username and Password, click **“Sign in”**
- If successful, you will be taken to the Consumer Choice Website.

Note: The portal is case sensitive. If you have any issues getting past this screen, please click **“Can’t access your account?”** (which is located below the sign-in button) or refer to the State Contact Information section on page 2 of these instructions to reach out for assistance.

Registering on the Consumer Choice Website

Once you have logged on through the Illinois.gov Authentication Portal, you are able to register as the administrator for your facility.

- Click the open circle next to “**Facility Administrator**”
- Then click the “**Register**” button

The screenshot shows the registration page for the Illinois Ombudsman Resource Center. At the top, there is a header with the Illinois Department on Aging logo, the text 'Illinois Ombudsman Resource Center', and a user profile for 'ILLINOIS\Joe.Danner'. Below the header, there is a navigation bar with 'Home' and 'Instructions'. The main content area is titled 'Welcome to Illinois Ombudsman Resource Center Registration'. It contains a form with the instruction: 'Please select one of the roles and click the **Register** button to continue your registration process.' There are two radio button options: 'Facility Administrator' and 'Ombudsman User'. A red arrow points to the 'Facility Administrator' option. Below the radio buttons is a blue 'Register' button, which is circled in red. At the bottom of the page, there is a footer with the address 'Illinois Department on Aging One Natural Resources Way, Suite 100 Springfield, IL 62702-1271' and links for 'Aging HOME | Privacy | Contact Us'.

As a Facility Administrator, you will be able add campuses and facilities to your designated organization and complete the questionnaire/survey for your facility or facilities.

The next screen (Organization Administration Registration) will have you choose whether your organization is “New” or “Existing”.

Note: The vast majority of the facilities in the State of Illinois have been uploaded to the website. It is recommended that you first select “**Existing Organization**”, and if you can’t find your facility, go back and select “**New Organization**”.

Existing Organization

As stated on the previous page, it is recommended that each individual first checks to see if their facility's ownership information has already uploaded to the Consumer Choice Website.

To do this:

- Click the open circle next to “Existing Organization”
- Then click the “Submit” button

The screenshot displays the Illinois Department on Aging website. The header includes the department's logo, the text "Illinois Department on Aging", the "Illinois Ombudsman Resource Center", and a link to "ILLINOIS\Joe.Danner". Below the header is a navigation bar with "Home" and "Instructions". The main content area is titled "Organization Administration Registration" and contains a form. The form has a label "Select if you are registering a New Organization or Existing One" with a red arrow pointing to two radio button options: "New Organization" and "Existing Organization". The "Existing Organization" option is selected. Below the radio buttons is a blue "Submit" button, which is circled in red. The footer contains the address "Illinois Department on Aging One Natural Resources Way, Suite 100 Springfield, IL 62702-1271" and links for "Aging HOME", "Privacy", and "Contact Us".

Illinois Department on Aging

Illinois Ombudsman Resource Center

ILLINOIS\Joe.Danner

Illinois Long-Term Care OMBUDSMAN PROGRAM

Home Instructions

Organization Administration Registration

Select if you are registering a New Organization or Existing One

☐ New Organization

☒ Existing Organization

Submit

Illinois Department on Aging One Natural Resources Way, Suite 100 Springfield, IL 62702-1271

Aging HOME | Privacy | Contact Us

On the “Register Administrator with Existing Ownership” screen (shown below) you will be able to see if your facility’s ownership information has already been uploaded to the Consumer Choice Website.

To do this:

- Click the arrow on the right side of the **Ownership Drop Box**
- Select your organization’s name from the alphabetized list in the drop box and then enter the requested information
- Then click the “**Register**” button

Illinois Department on Aging

Illinois Ombudsman Resource Center

ILLINOIS Joe Danner

Illinois Long-Term Care OMBUDSMAN PROGRAM

Home | Instructions

Organization Administration Registration

Register Administrator with Existing Ownership

Role
ORGANIZATIONOwner

Ownership
--Select--

First Name*

Last Name*

Email*

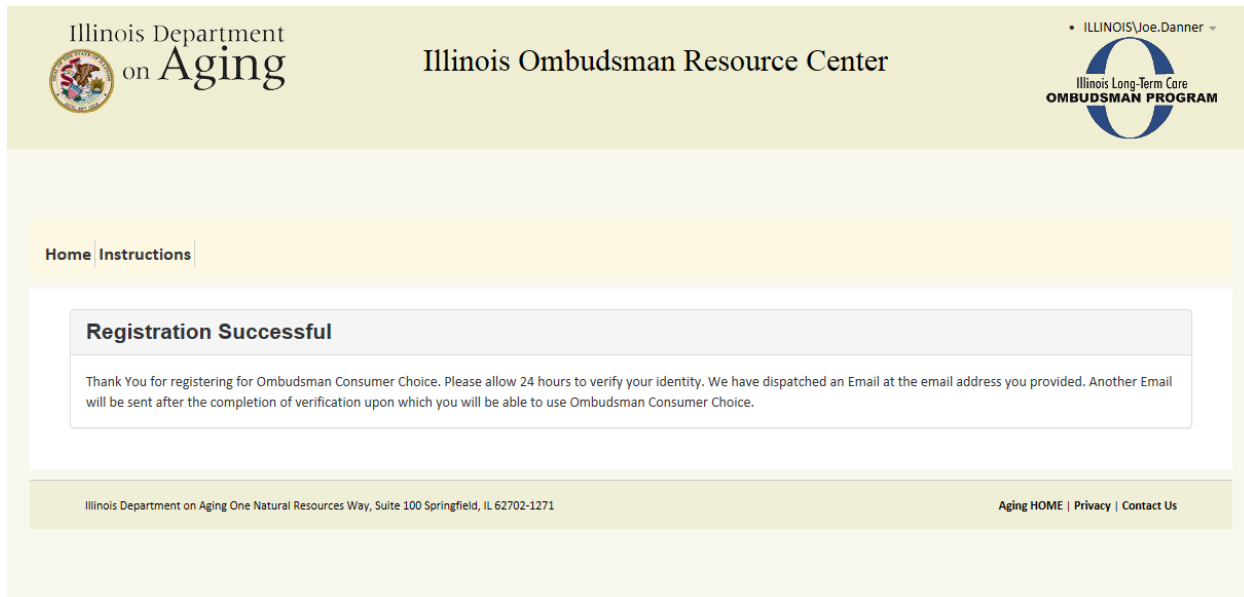
Confirm Email*

Phone*

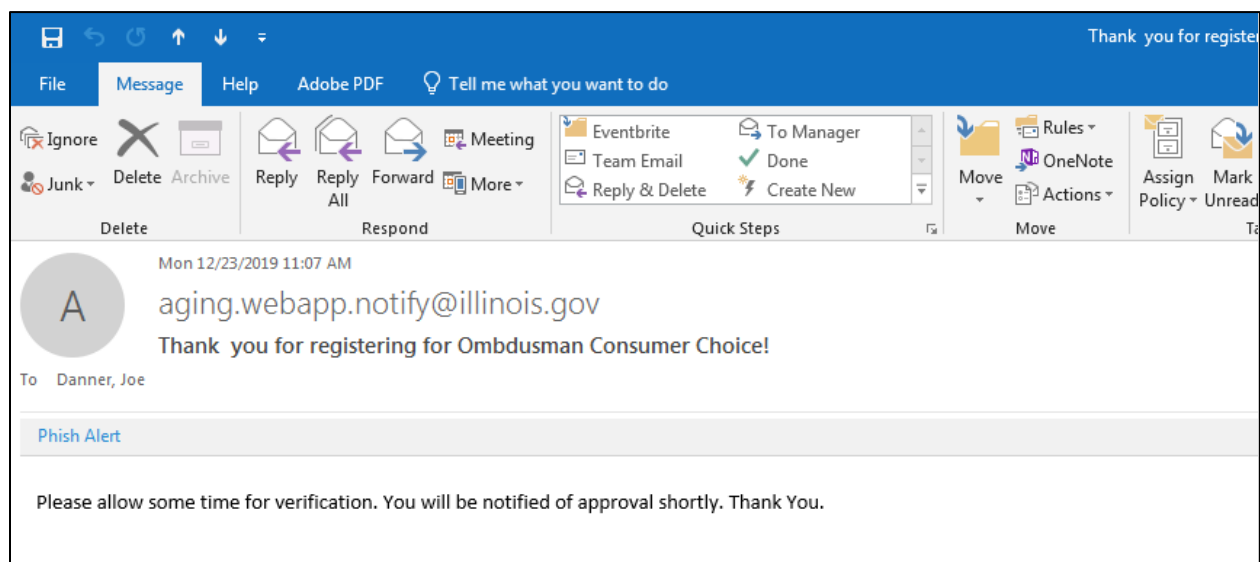
Register

Note: If you DO NOT see your organization’s name in the drop box, please return to the previous screen by clicking the “Back” arrow located in the top left corner of your web-browser window and select “New Organization”. Instructions for registering a “New Organization” are on page 12.

After selecting your organization's name, entering the requested information, and clicking the "Register" button you will see a confirmation message on your screen.



Along with this message, the following message will be sent to the email address you previously provided:



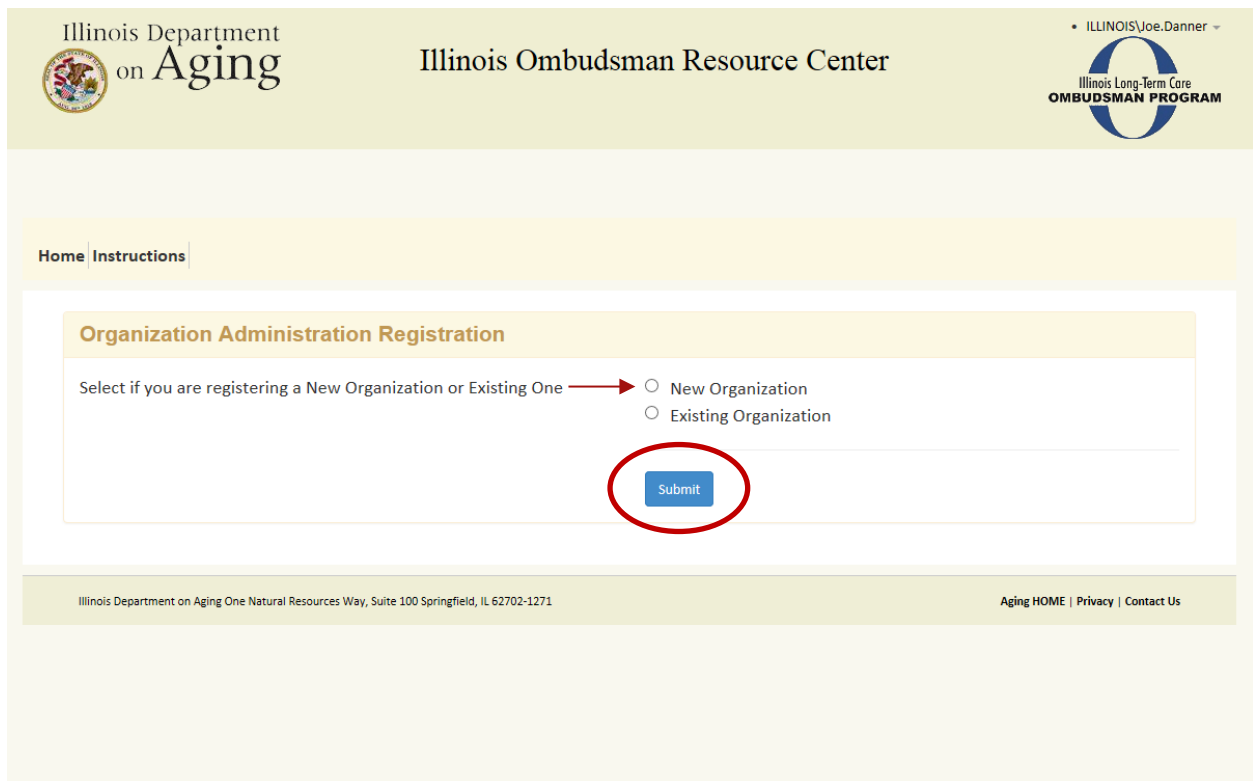
You will receive another email after the verification process has been completed. At that time, you will be able to fully use the Consumer Choice website and complete your facility's questionnaire/survey.

New Organization

If your organization's name IS NOT on the Existing Organization alphabetized list, you will need to register as a "New Organization".

To do this:

- Click the open circle next to "New Organization"
- Then click the "Submit" button



The screenshot displays the Illinois Department on Aging website. The header includes the department's logo, the text "Illinois Department on Aging", the "Illinois Ombudsman Resource Center", and a link to "ILLINOIS\Joe.Danner". Below the header is a navigation bar with "Home" and "Instructions". The main content area is titled "Organization Administration Registration". It contains a form with the instruction "Select if you are registering a New Organization or Existing One" followed by two radio buttons: "New Organization" and "Existing Organization". A red arrow points to the "New Organization" radio button. Below the radio buttons is a blue "Submit" button, which is circled in red. The footer contains the address "Illinois Department on Aging One Natural Resources Way, Suite 100 Springfield, IL 62702-1271" and links for "Aging HOME", "Privacy", and "Contact Us".

After clicking “Submit”, you will need to enter the ownership, contact and address information for your new organization.

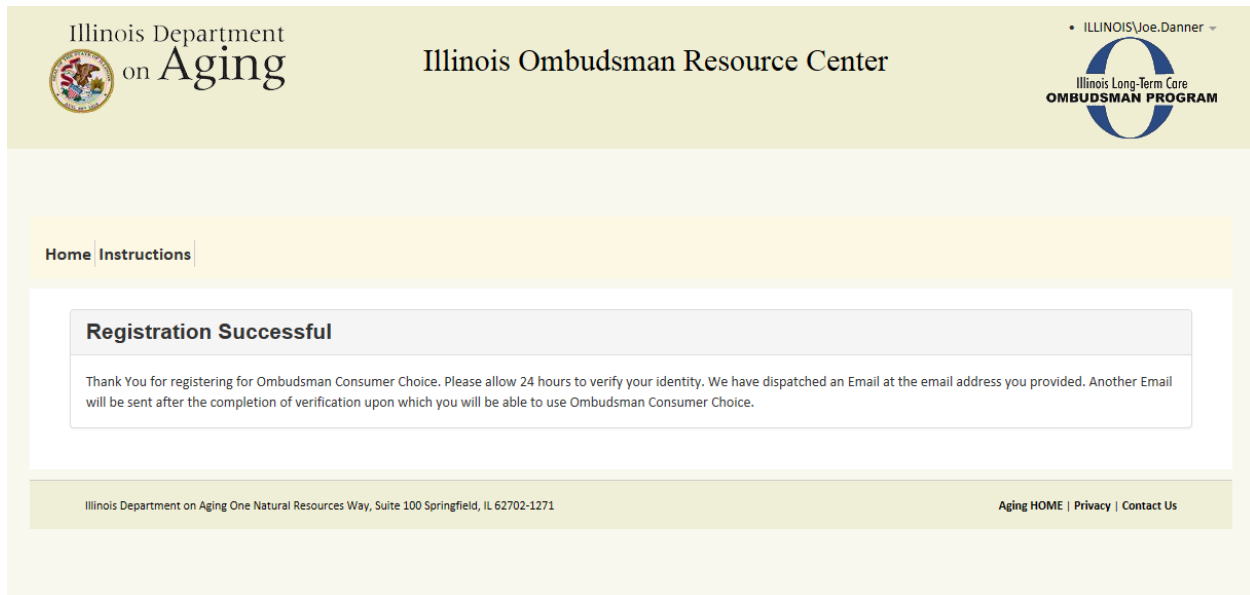
- Input the requested information
- All the required boxes are marked with “*”
- Then click “**Register**”

The screenshot shows the 'Register a New Organization' form on the Illinois Ombudsman Resource Center website. The header includes the Illinois Department on Aging logo, the text 'Illinois Ombudsman Resource Center', and the Illinois Long-Term Care Ombudsman Program logo. The form is divided into several sections:

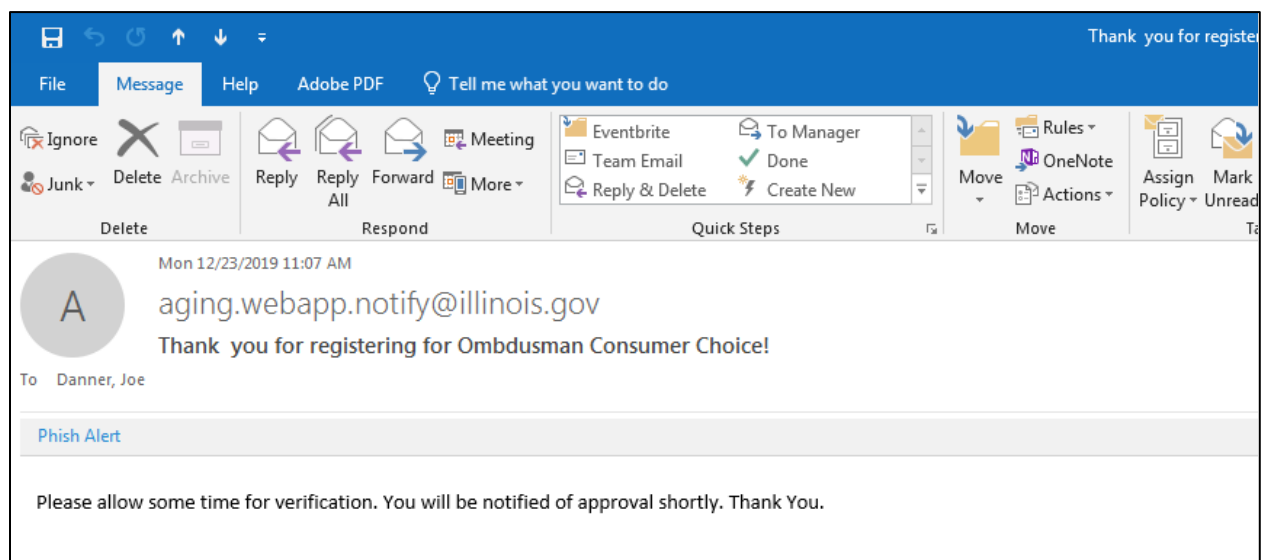
- Role:** A dropdown menu with 'ORGANIZATIONOwner' selected.
- Personal Information:** Fields for First Name*, Last Name*, Email*, Confirm Email*, and Phone*.
- Ownership:** A field for Legal Name*.
- Contact:** Fields for First Name*, Last Name*, Email*, and Phone*.
- Address:** Fields for Street 1*, Street 2, City*, State*, Zip*, and ZipPlus4.

The 'Register' button at the bottom left of the form is circled in red.

After entering your organization's information and clicking the "Register" button you will see a confirmation message on your screen.



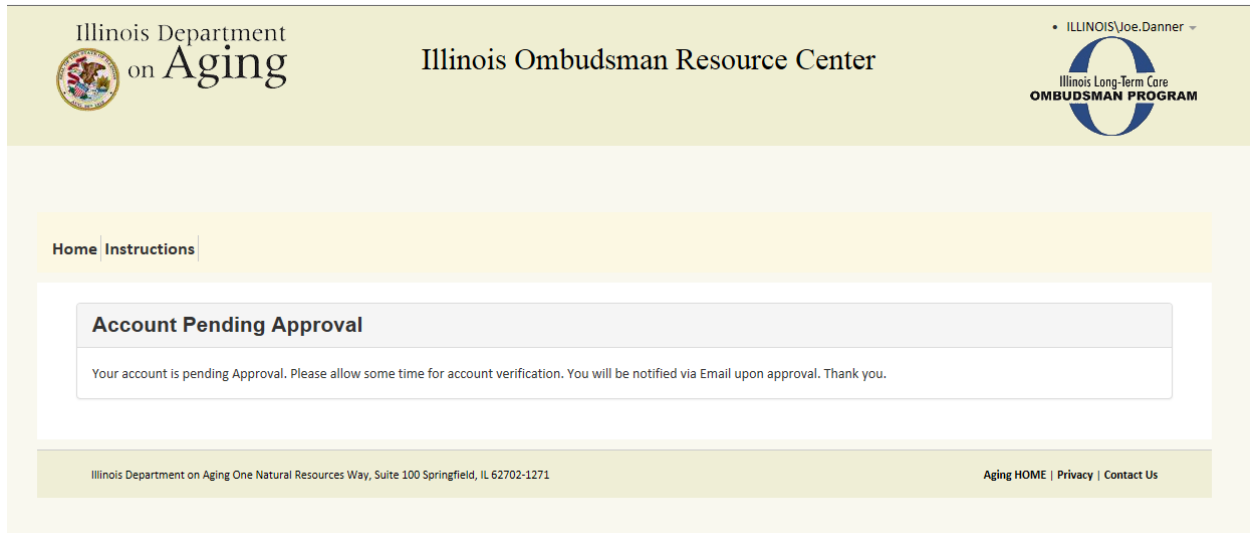
Along with this message, the following message will be sent to the email address you previously provided:



You will receive another email after the verification process has been completed. At that time, you will be able to fully use the Consumer Choice website and complete your facility's questionnaire/survey.

Account Pending

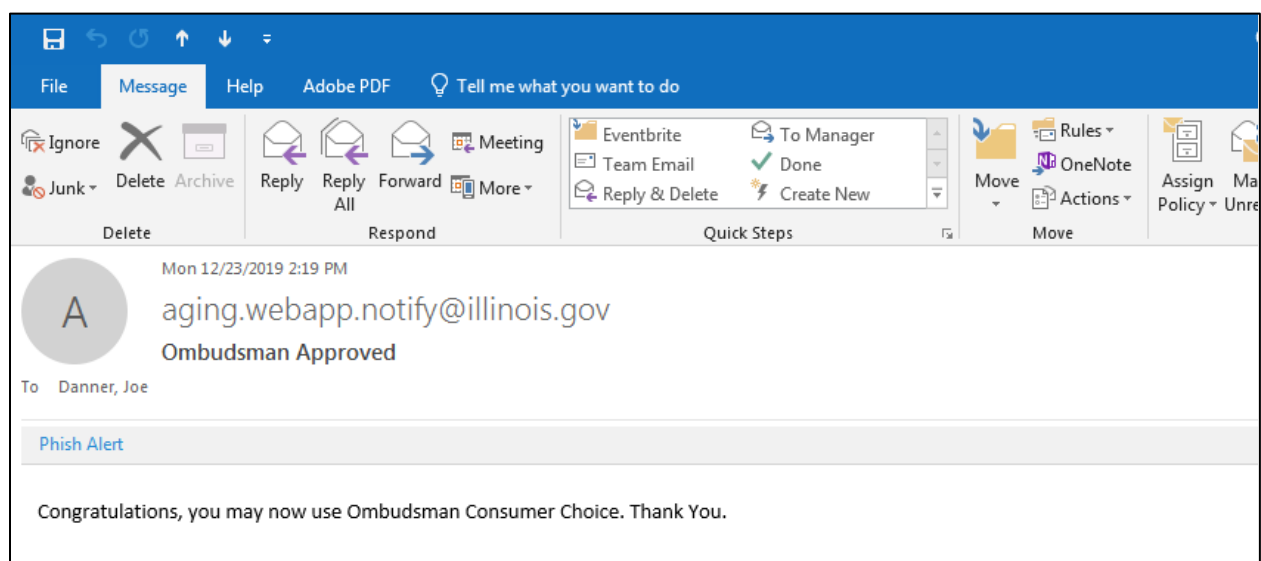
If you attempt to access the Consumer Choice website prior to being approved, you will receive the following message:



Please allow at least 24 hours for verification after successfully registering, but if you have not received an Approval Email and feel there may be an issue with your account, please email aging.sltcoprogram@illinois.gov stating the organization's name, your contact info and registration date.

Approval Email

Once you are approved to access the Consumer Choice Website, the following email will be sent to the address you previously provided.



The Consumer Choice Website

As mentioned earlier in the instructions, the URL for the administrative side of the Consumer Choice Website is <https://webapps.illinois.gov/AGE/OmbudsmanConsumerChoice/>.

User Profile Page

Now that you have been verified to use the website, the first page you will be taken to after the Illinois.gov Authentication Portal is your User Profile page.

From this page you can edit or correct any profile information by clicking the “**Pen & Paper**” button to the left of your name.

Illinois Department on Aging

Illinois Ombudsman Resource Center

ILLINOIS Joe Danner

Illinois Long-Term Care OMBUDSMAN PROGRAM

Home | Instructions

Joe Danner Profile

First Name*

Joe

Last Name*

Danner

Email*

joe.danner@illinois.gov

Phone*

(217) 557-0419

Ownership

Corporate Name
Example Ownership

Campus

Campus	Ownership	Created On	Facilities
--------	-----------	------------	------------

Facilities

Facility	Ownership	Campus	Registered On	Time Remaining Until Recertification
----------	-----------	--------	---------------	--------------------------------------

This page is also each user’s default Home Page. It can be reached at any time while using the website by clicking the “Home” tab at the top of the page.

Adding a Campus

A campus refers to a location with multiple facilities. The location may have multiple buildings that are the same type of facilities, multiple buildings that are different types of facilities, or a single building that houses more than one kind of long-term care.

Note: You DO NOT have to add a campus. Facilities may be added without campuses. If you don't want to add a campus, please proceed to "Adding a Facility" on page 21.

To add a campus:

- Click on your "**Corporate Name**" (it is located in the Ownership box of the User Profile page)



Illinois Department
on Aging

Illinois Ombudsman Resource Center

• ILLINOIS\Joe.Danner ▾



[Home](#) | [Instructions](#)

 **Joe Danner Profile**

First Name*

Joe

Last Name*

Danner

Email*

joe.danner@illinois.gov

Phone*

(217) 557-0419

Ownership

Corporate Name

Example Ownership

Campus

Campus	Ownership	Created On	Facilities
--------	-----------	------------	------------

Facilities

Facility	Ownership	Campus	Registered On	Time Remaining Until Recertification
----------	-----------	--------	---------------	--------------------------------------

- You will be transferred to the Ownership page where you can add campuses and facilities
- Click the “+” next to the word Campus

Ownership

Example Ownership

Address	One Natural Resources Way Springfield, IL 62702-1271
Primary Contact Name	Joe Danner
Primary Contact Phone	(217) 557-0419
Primary Contact Email	joe.danner@illinois.gov

+ Campus

Name	Created On	Facilities
No Available Campuses		

+ Facility

Name	Created On	Registered On	Time Remaining Until Recertification
No Available Facilities			

- Then enter the campus information and click “Add”

Campus

Legal Name*

Contact

First Name* Last Name*

Email* Phone*

Address

Street 1* Street 2

City* State* Zip* ZipPlus4

Add

Once a campus has been added, you can add the facilities to it.

- Click the “+” next to the word Facility

The screenshot shows a web interface for managing a campus. At the top, there's a header 'Campus' with a home icon. Below it, a section titled 'Example Campus' contains a form with the following fields:

Address	One Natural Resources Way Springfield, IL 62702-1271
Primary Contact Name	Joe Danner
Primary Contact Phone	(217) 557-0419
Primary Contact Email	joe.danner@illinois.gov

Below the campus details, there's a section titled '+ Facility'. The '+' icon is circled in red. Underneath, there's a table with the following columns: Name, Created On, Registered On, and Time Remaining Until Recertification. The table currently shows 'No Available Facilities'.

- Then enter the facility information and click “Add”

The screenshot shows a web interface for adding a new facility. The form is titled 'Facility' and contains several sections:

- Facility Information:** Fields for Facility Type (dropdown), Legal Name (text), Website Url (text), DPH License (text), DPH Facility Id (text), and Federal Provider Number - If Applicable (text).
- Contact:** Fields for First Name (text), Last Name (text), Email (text), and Phone (text).
- Address:** Fields for Street 1 (text), Street 2 (text), City (text), State (text), Zip (text), and ZipPlus4 (text).
- Facility Image:** A text input field and a 'Browse...' button.

At the bottom of the form, there are two buttons: 'Add' and 'Cancel'. The 'Add' button is circled in red.

Now that the facility has been added, you may begin the questionnaire/survey.

- Click **“Begin Survey”**

Note: Instructions for the questionnaire/survey begin on page 24.

Illinois Department on Aging | Illinois Ombudsman Resource Center | ILLINOIS\Joe.Danner | Illinois Long-Term Care OMBUDSMAN PROGRAM

Home | Instructions | Example Ownership

Facility

Currently InActive Medicare Info

[Upload Photo](#)

Address: One Natural Resources Way
Springfield, IL 62702

Primary Contact Name: Joe Danner

Primary Contact Phone: (217) 557-0419

Primary Contact Email: joe.danner@illinois.gov

Website:

[Begin Survey](#)

You will also now be able to get to a **Campus** or **Facility** page from your Home Page/User Profile.

Home | Instructions

Joe Danner Profile

First Name*: Joe | Last Name*: Danner

Email*: joe.danner@illinois.gov | Phone*: (217) 557-0419

Ownership

Corporate Name: Example Ownership

Campus

Campus	Ownership	Created On	Facilities
Example Campus	Example Ownership	12/23/2019 3:12:22 PM	1

Facilities

Facility	Ownership	Campus	Registered On	Time Remaining Until Recertification
Example Campus Nursing Facility	Example Ownership	Example Campus	12/23/2019 3:28:48 PM	

Adding a Facility (Without a Campus)

To add a facility without adding a campus you need to start at the Home Page/User Profile, which is the first screen you are taken to upon entering the Consumer Choice Website. You can also reach that page by clicking the “Home” tab at the top of the page at any time.

From the Home Page/User Profile:

- Click on your “**Corporate Name**” (it is located in the Ownership box of the User Profile page)



Illinois Department
on Aging

Illinois Ombudsman Resource Center

ILLINOIS Joe Danner



Home | Instructions

 Joe Danner Profile

First Name*

Joe

Last Name*

Danner

Email*

joe.danner@illinois.gov

Phone*

(217) 557-0419

Ownership

Corporate Name

Example Ownership

Campus

Campus	Ownership	Created On	Facilities
--------	-----------	------------	------------

Facilities

Facility	Ownership	Campus	Registered On	Time Remaining Until Recertification
----------	-----------	--------	---------------	--------------------------------------

- You will be transferred to the Ownership page where you can add campuses and facilities
- Click the “+” next to the word Facility

Example Ownership

Address	One Natural Resources Way Springfield, IL 62702-1271
Primary Contact Name	Joe Danner
Primary Contact Phone	(217) 557-0419
Primary Contact Email	joe.danner@illinois.gov

Campus

Name	Created On	Facilities
No Available Campuses		

Facility

Name	Created On	Registered On	Time Remaining Until Recertification
No Available Facilities			

- Then enter the facility information and click “Add”

Facility

Facility Type*

--Select--

Legal Name*

Website Url

DPH License*

DPH Facility Id*

Federal Provider Number - If Applicable

Contact

First Name*

Last Name*

Email*

Phone*

Address

Street 1*

Street 2

City*

State*

Zip*

ZipPlus4

Facility Image

Browse...

Add

Cancel

Now that the facility has been added, you may begin the questionnaire/survey.

- Click **"Begin Survey"**

Note: Instructions for the questionnaire/survey begin on page.

Illinois Department on Aging | Illinois Ombudsman Resource Center | ILLINOIS\Joe.Danner | Illinois Long-Term Care OMBUDSMAN PROGRAM

Home | Instructions | Example Ownership

Facility

Currently InActive Medicare Info

[Upload Photo](#)

Address: One Natural Resources Way, Springfield, IL 62702

Primary Contact Name: Joe Danner

Primary Contact Phone: (217) 557-0419

Primary Contact Email: joe.danner@illinois.gov

Website:

[Begin Survey](#)

You will also now be able to get to any **Campus** or **Facility** page from your Home Page/User Profile.

Home | Instructions

Joe Danner Profile

First Name: Joe | Last Name: Danner

Email: joe.danner@illinois.gov | Phone: (217) 557-0419

Ownership

Corporate Name: Example Ownership

Campus

Campus	Ownership	Created On	Facilities
Example Campus	Example Ownership	12/23/2019 3:12:22 PM	1

Facilities

Facility	Ownership	Campus	Registered On	Time Remaining Until Recertification
Example Campus Nursing Facility	Example Ownership	Example Campus	12/23/2019 3:28:48 PM	
Example NO-Campus Facility	Example Ownership		12/24/2019 8:52:34 AM	

Questionnaire/Survey

The Consumer Choice Website questionnaire is split up in sections on the left side of the screen. Each section has several questions. All questions are required to be answered before submitting and verifying a completed questionnaire. You can skip back and forth between categories by clicking the Section Titles or go in order by clicking Save & Continue on the bottom right of the screen.

Nursing Facility - Survey

Medical Care, Services and Treatments

Special Services and Amenities >

Facility and Resident Profile >

Meals and Nutrition >

Rooms, Furnishings, and Equipment >

Family, Volunteer, and Visitation

Provisions >

Safety and Security >

Staffing >

Ownership & Administration >

Verification >

1. Number of current residents whose primary diagnosis or reason for admission is:

2. Which of the following services does the facility provide? (check all that apply)

3. Which of the following types of products does the facility provide for residents with incontinence? (check all that apply)

4. Which medical specialists are on staff or have an agreement with the facility to provide onsite care? (check all that apply):

5. Residents have a choice of Physicians:

6. Pharmacy

7. What is the current average number of nursing restorative programs per resident? (Total number of restorative programs provided to all residents divided by the number of residents, carried out two decimal points, i.e. 252 programs divided by 100 residents=2.52.)

Save & Continue

Questions that have NOT been answered will appear in **red**. To answer, click on each **question**. The question will expand for your answer.

Medical Care, Services and Treatments

Special Services and Amenities >

Facility and Resident Profile >

Meals and Nutrition >

Rooms, Furnishings, and Equipment >

Family, Volunteer, and Visitation

Provisions >

Safety and Security >

Staffing >

Ownership & Administration >

Verification >

1. Number of current residents whose primary diagnosis or reason for admission is:

2. Which of the following services does the facility provide? (check all that apply)

3. Which of the following types of products does the facility provide for residents with incontinence? (check all that apply)

4. Which medical specialists are on staff or have an agreement with the facility to provide onsite care? (check all that apply):

5. Residents have a choice of Physicians:

6. Pharmacy

	Pharmacy Choice	Is there a cost?
Can MEDICARE/MEDICAID residents choose their own pharmacy?	☐	☐
Can PRIVATE PAY residents choose their own pharmacy?	☐	☐

7. What is the current average number of nursing restorative programs per resident? (Total number of restorative programs provided to all residents divided by the number of residents, carried out two decimal points, i.e. 252 programs divided by 100 residents=2.52.)

Save & Continue

Questions that have been successfully answered will be white.

Nursing Facility - Survey

- Medical Care, Services and Treatments
- Special Services and Amenities
- Facility and Resident Profile
- Meals and Nutrition
- Rooms, Furnishings, and Equipment
- Family, Volunteer, and Visitation
- Provisions
- Safety and Security
- Staffing
- Ownership & Administration
- Verification

1. Number of current residents whose primary diagnosis or reason for admission is:

2. Which of the following services does the facility provide? (check all that apply)

3. Which of the following types of products does the facility provide for residents with incontinence? (check all that apply)

4. Which medical specialists are on staff or have an agreement with the facility to provide onsite care? (check all that apply):

5. Residents have a choice of Physicians:

6. Pharmacy

7. What is the current average number of nursing restorative programs per resident? (Total number of restorative programs provided to all residents divided by the number of residents, carried out two decimal points, i.e. 252 programs divided by 100 residents=2.52.)

Save & Continue

After completing all the sections of questions, you will be asked to verify all the information entered is accurate to the best of your knowledge.

- Click the **empty box**, then click the **“Submit”** button

Nursing Facility - Survey

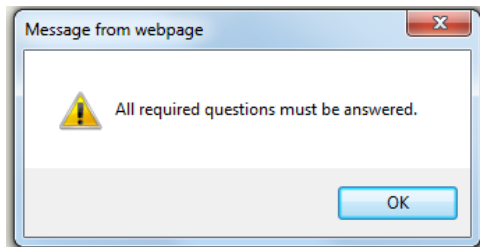
- Medical Care, Services and Treatments
- Special Services and Amenities
- Facility and Resident Profile
- Meals and Nutrition
- Rooms, Furnishings, and Equipment
- Family, Volunteer, and Visitation
- Provisions
- Safety and Security
- Staffing
- Ownership & Administration
- Verification

1. By checking the box below I verify this information is accurate and complete to the best of my knowledge.

☐

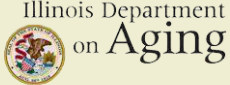
Submit

If a question has been left unanswered, you will receive the following message:



The question or questions that do NOT have answers should appear in red.

Once all the questions have been answered and verified, you will receive the following message:



Illinois Ombudsman Resource Center

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Illinois Long-Term Care
OMBUDSMAN PROGRAM

Home | Instructions | Example Ownership | Example Campus

Nursing Facility - Survey

Your survey has been certified and is available for public view.

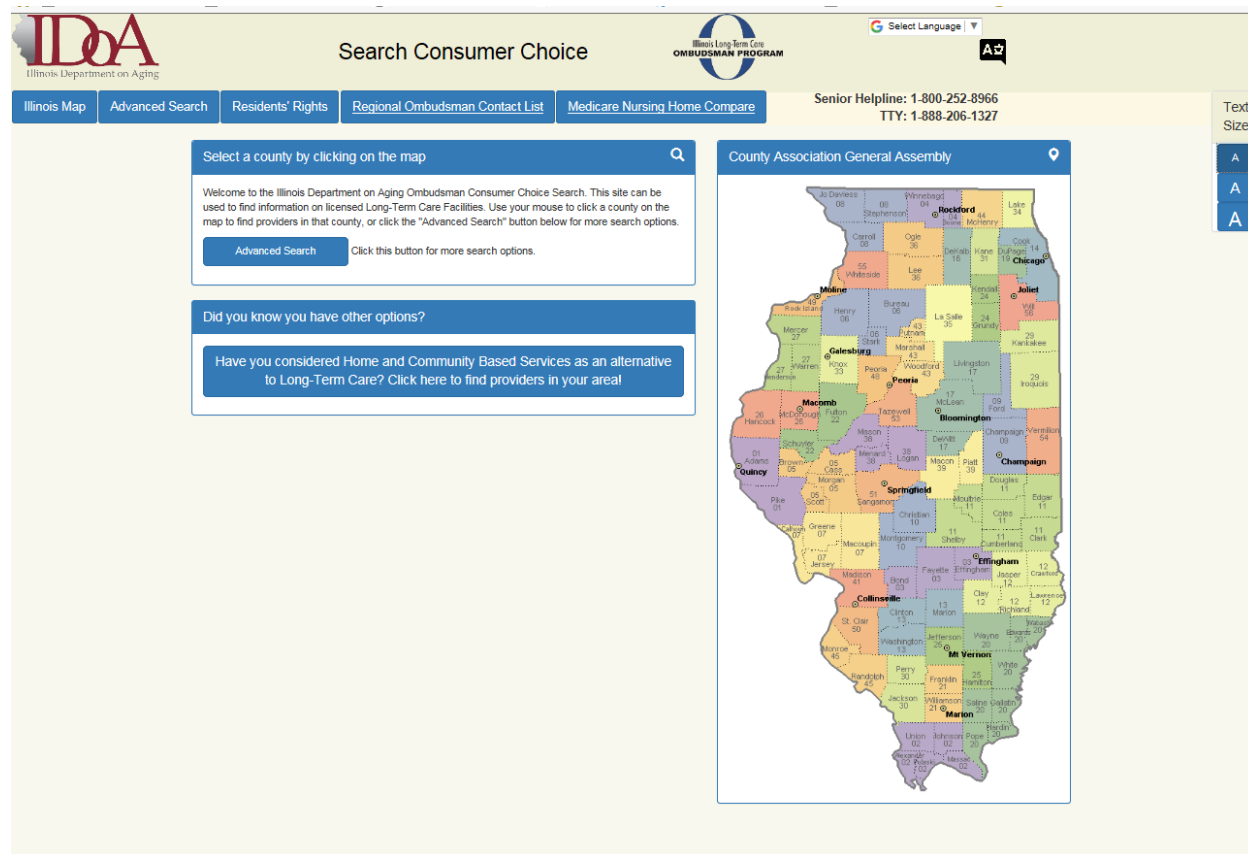
Medical Care, Services and Treatments	1. Number of total licensed nursing facility beds:
Special Services and Amenities	2. Number of occupied beds on date questionnaire completed:
Facility and Resident Profile	3. Number of Medicare certified beds:
Meals and Nutrition	4. Number of Medicaid certified beds:
Rooms, Furnishings, and Equipment	5. Is there an admission/entry fee?
Family, Volunteer, and Visitation	6. Does the facility admit new residents on Medicaid?
Provisions	7. What is the average daily payment made by a private pay resident in a:
Safety and Security	8. Number of current residents who are:
	9. Number of current residents who have been at the facility:

Note: You can update or edit your questionnaire/survey at any time by selecting the Facility from your Home Page/User Profile.

Public Facing Side of Consumer Choice Website

Congratulations, your facility (or facilities) and all the service information you have entered are now available for the public to view at <https://webapps.illinois.gov/AGE/OmbudsmanSearch>.

This is the link the general public will use when accessing the website. Here is what they will see:



Individuals can search the website by using the interactive map to find facilities in their area or through the advanced search, where an individual can specify his or her exact needs and find facilities that offer them.

THANK YOU FOR REGISTERING FOR THE CONSUMER CHOICE WEBSITE

The State Long-Term Care Ombudsman appreciates your continued cooperation and efforts to complete this process.