

FASL - Facility Assessment List

This screen displays, in reverse chronological order, a history of all assessments performed on a specific facility.

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CAFSFASL                FACILITY ASSESSMENT LIST                02/26/2007    17:15
USER ID : CB4142                PAGE NO: 001
PROV NO : 0007109  001        PROV NAME: MAHONEY SEAN AND SUSANNE
                                FACIL NAME: MAHONEY SEAN AND SUSANNE

TO SELECT, ENTER I=INQUIRE OR M=MODIFY    START FROM :
                                           ASSESSMENT TYPE :

  ASSESSMENT
SEL  DATE      TYPE      DESCRIPTION                RECM  DESCRIPTION
-   02/26/2007  LRA    LICENSING/REGISTRATION ASSESSME  REG  REGULAR

                                           PATH:
```

Field Descriptions (F12) indicates code lookup is available.

PROV NO (F12)

Enter the provider number of the provider you wish to add or view facility assessment details for.

PROV NAME

This field will display the provider name of the provider whose ID is entered in the PROV NO field.

FACIL NAME

This field will display the facility name of the provider whose ID is entered in the PROV NO field.

START FROM

Enter a specific date you want to view assessment details for. *All assessments with a date from the entered date to current date will be displayed.*

ASSESSMENT TYPE

Enter the specific assessment type code you want to view assessment details for. *All assessments for the entered codes will be displayed. Up to five (5) codes can be entered.*

SEL

Enter an "I" if you want to inquire on assessment details or "M" if you want to modify assessment details.

ASSESSMENT DATE

This field will display the date the assessment was completed.

TYPE (F12)

This field will display the type of assessment that was completed.

DESCRIPTION

This field will display the description of the listed assessment type.

RECM (F12)

This field will display the recommendation code based on the completed assessment.

DESCRIPTION

This field will display the description of the listed recommendation code.

Additional Information

None.