



Release Notes 2026.6

Release Overview

This release delivers enhancements across **Clinical, Integrations, EMAR, and ElderSmarts**, with a strong focus on improving visibility, auditability, and operational efficiency. From expanded Activity Tracking and resident census management to richer Integrator API capabilities and new clinical reporting dashboards, these updates provide teams with better insight into resident care, system activity, and organizational performance.

In addition, EMAR receives important usability and workflow improvements, including mobile navigation enhancements, configurable time formats, medication backup support, and more accurate scheduling previews—helping staff work more efficiently whether at a workstation or on the go.

Highlights

Expanded Activity Tracking – Broader audit coverage across resident records, community settings, ElderForms, Census History, Medical History lists, and CRM-related workflows, providing greater transparency into who made changes, what changed, and when.

Census Types & Resident Housing Enhancements – New Census Types configuration and Census History tracking give Clinical Managers greater control over resident reporting and historical census documentation.

Integrator API Expansion – New endpoints for resident vitals and allergies, enhanced resident responses, flexible data-domain retrieval, and improved duplicate resident handling support more powerful and reliable integrations.

EMAR Workflow Improvements – Mobile navigation enhancements, configurable 12-hour or 24-hour time formats, Medication List backup support, and more accurate schedule previews improve usability and medication management workflows.

ElderSmarts Clinical & Incident Dashboards – New reports provide visibility into clinical alerts, top diagnoses, residents with recurring incidents, and a unified incident view across Legacy and NEXT systems.

Clinical Reliability Improvements – Updates to evaluations, insurance workflows, admissions, occupancy management, provider management, and resident records improve data integrity and streamline day-to-day operations.

Together, these enhancements strengthen visibility, simplify workflows, and provide teams with the tools they need to make informed decisions, maintain compliance, and deliver high-quality resident care.



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Org Admin Login Workflow: Community Listing Redesign


















The Community listing experience has been redesigned to get users to the right place faster. Navigation at sign-in and within the platform now routes each user role more directly based on their access level, reducing unnecessary clicks and improving overall flow.

What's New

Role-Based Sign-In Routing

Each user role is now routed more efficiently upon sign-in:

- **Org Admins** with access to more than one community are directed straight to the Community listing — no extra navigation required.
- **Community Admins** are now directed to the Community listing at sign-in and can switch between communities using the community dropdown, as before.

Communities 10	
Name ↑	
Crawfordville AL (Ty)	     
Green Acres	    
Howard Park House	     

Smarter Navigation Within the Listing

Clicking within the Community listing now takes users directly to their destination:

- **Community name** — routes to that community's Settings page.
- **App icons in a community row** — routes directly to that specific app for the selected community.

Howard Park House	     
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Layout & Display Improvements

- The listing page now expands to make better use of available screen space, reducing unnecessary whitespace.
- Mobile view retains full navigation capabilities with a condensed layout, allowing users to open community settings and launch app-specific navigation on any device.

What This Means

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- Org Admins reach the Community listing in fewer clicks after signing in.
- App navigation from the Community listing is more direct — one click to the app, no intermediate steps.
- Existing app access restrictions remain in effect — users only see and access the apps they are permitted to use.

Resident List: Column Preference Persistence

The Resident List now remembers each user's column configuration between sessions. Previously, column selections could reset unexpectedly due to inconsistent browser caching behavior. Column preferences are now reliably saved per user within the same browser, eliminating the need to reconfigure the view after every login.

What's New

Persistent Column Configuration

Column show/hide selections and column order are now saved automatically when a user updates their settings. Preferences are retained through:

- Logout and login
- Hard page refresh

Persistence applies per user within the same browser. Column preferences do not carry over to a different browser or device — users signing in on a new machine will see the default column configuration.

Default Behavior for New Users & New Columns

- New users receive the default column configuration on first login.
- When new columns are introduced in future releases, they appear in a default state without affecting or overwriting existing saved preferences.

What This Means

- Staff who log in daily will find their column setup exactly as they left it, with no need to reconfigure.
- The Resident List view is more consistent and predictable across sessions.
- Users on shared workstations will see their own saved preferences when logged in under their account.

Resident Evaluations: Mark as Previously Completed

The "Mark as Previously Completed" option has been restored to the Resident Evaluations workflow and expanded to support all evaluation types, including those that include a Placement Question. Users can now record a previously completed evaluation directly from the Upcoming section without opening the full evaluation form.

Navigation: Residents → Medical → Evaluations → Upcoming



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What's New

Mark as Previously Completed Option Restored

The “Mark as Previously Completed” option is now available in the row menu for upcoming evaluations, alongside the existing Open Evaluation and Update Due Date actions. This option is available for one-off evaluations that do not use scheduled recurrence, as well as scheduled evaluations that need a prior completion recorded.

Placement Question Support

Evaluations that include a Placement Question — requiring Rotation and Step selections — can now be marked as Previously Completed. The Previously Completed modal now includes the Rotation and Step fields when applicable, matching the fields available in the Update Due Date modal. All required fields must be completed before saving.

Access

Access to Mark as Previously Completed follows the same permissions as adding an evaluation to a resident record.

What This Means

- Users can record a previously completed evaluation without navigating into the full evaluation form.
- Evaluations with Placement Questions can now be fully processed through the Previously Completed workflow without error.
- The previously completed record is saved, and the evaluation moves out of the Upcoming section, keeping the resident's evaluation history accurate.

Clinical Configuration: Census Types

Census Types configuration is now available in Clinical > Configuration, giving Clinical Managers full control to create, manage, and maintain the Census Types used for resident reporting. Census Types are for reporting purposes only and do not affect unit care levels, evaluation care levels, or risk levels.

Navigation: Clinical → Configuration → Census Types

What's New

Census Types List Page

The Census Types configuration page displays all Census Types for the community in a sortable, filterable table showing each type's name and current status (Enabled or Disabled). Users can create a new Census Type using the New button or open an existing type to edit it by clicking on its row.

Create and Edit Census Types

Census Types are managed through a modal that supports creating new types and editing existing ones. Each Census Type has a Name (required and unique) and an Enabled/Disabled toggle. Duplicate names are not permitted — the system will display an



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error if a name already exists. Disabled Census Types remain available for historical reference but are not selectable for new assignments.

Delete Census Types

Census Types that are not assigned to any resident records can be deleted from the edit modal. If a Census Type is currently in use, the Delete option is disabled, and a tooltip indicates that the type must be removed from all resident records before it can be deleted.

Update Impact: Changes Propagate to Resident Records

When saving a change to a Census Type that is currently assigned to one or more residents, the system displays a confirmation prompt before saving. If confirmed, the update applies to both the Census Type configuration and all resident records — including Census History entries — that reference that Census Type. This includes name changes, which will be reflected in historical records. If the update is not confirmed, no changes are saved.

Activity Tracking

All Create, Update, and Delete actions on Census Types are recorded in Activity Tracking, including the user and timestamp for each change.

What This Means

- Clinical Managers can now create and maintain Census Types directly in Eldermark NEXT without relying on system-level setup.
- Census Type names can be corrected or updated, and those changes will automatically reflect resident Census History.
- The system prevents accidental deletion of Census Types that are actively assigned to residents, protecting data integrity.
- All configuration changes are auditable through Activity Tracking.

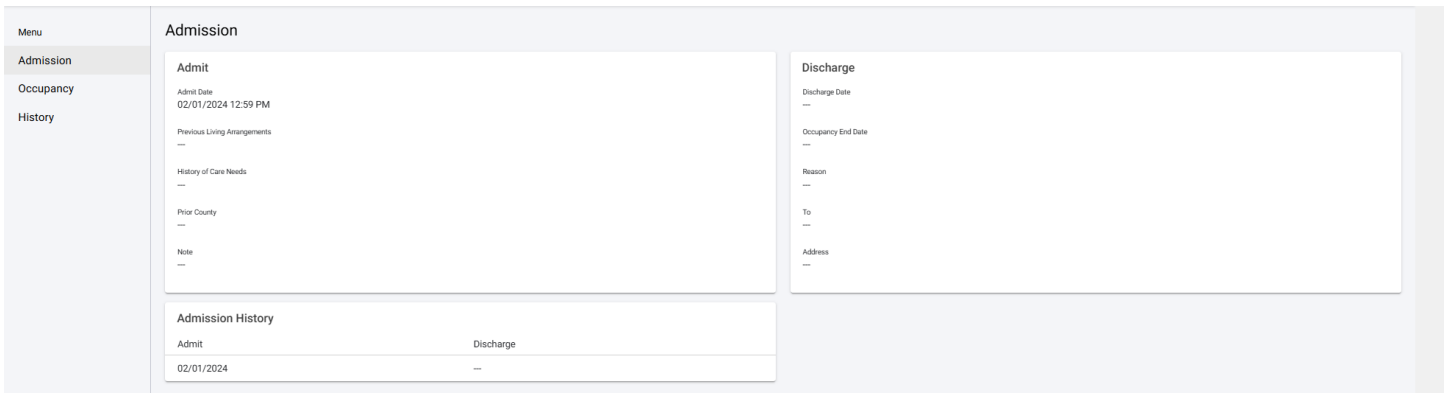
Resident Housing Tab: Reorganization & Census History

The Housing tab within the Resident record has been reorganized to improve clarity and introduce a dedicated History view. A new Census History feature is also available, allowing clinical staff to document and review a resident's census type timeline directly from their record.

Navigation: Clinical → Residents → Resident Record → Housing



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What's New

Updated Housing Tab Menu

The Housing tab navigation has been updated with two changes:

- The “Summary” section has been renamed to “Admission” to better reflect its content.
- A new “History” section has been added to the Housing tab menu.

Admission Page (Formerly Summary)

The Admission page now focuses exclusively on admission-related information. The Care History card has been moved to the new History page. The Admission History card has shifted into the space previously occupied by Care History — all existing Admission History functionality, data, and behavior remain unchanged.

New History Page

The History page consolidates resident housing history in one location. It contains two cards:

- **Care History** — moved from the Admission page. Displays the resident's service history by Start and End of Services. Functionality is unchanged.
- **Census History** — a new card that tracks the resident's census type over time, including Census Type, Start date, and End date. This is not related to the unit product type.

Start of Services	End of Services
04/28/2026	—
03/28/2026	04/03/2026
02/01/2026	02/10/2026
09/03/2025	09/03/2025

Census Type	Start	End
AL	06/15/2026	—

Census History

Clinical users can now create, view, edit, and delete Census History entries directly from the resident's Housing > History page. Each entry records:

- **Census Type** — selected from active Census Types configured in Clinical > Configuration > Census Types.

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- **Start of Services** — required; defaults to today's date.
- **End of Services** — optional; cannot be earlier than the Start date.

Census Type dates cannot overlap across history lines. When a new Census History entry is added and an active entry exists, the system automatically sets the End date on the previous entry to the day before the new entry's Start date.

What This Means

- The Housing tab is easier to navigate, with Admission details and historical records clearly separated.
- Care History is now grouped with Census History on the dedicated History page, giving staff a complete view of service and census timelines in one place.
- Clinical staff can now document and maintain a resident's census history without leaving the resident record.
- Only enabled Census Types are available for selection, keeping the dropdown clean and accurate.

Activity Tracking Enhancements

Activity Tracking continues to expand its coverage across Eldermark NEXT, providing broader visibility into who made changes, what changed, and when — across resident records, settings, and community configuration.

Expanded Coverage Resident Census History

Create, Update, and Delete activity is now tracked for Census History entries on the resident record. Each entry captures the Census Type, Start of Services, and End of Services. Update events show old and new values for each field that changed. All activity is visible in the resident's Activity Tracking view as well as the Community Activity Tracking listing.

Medical History Lists

Activity Tracking now covers changes made to Medical History list values in Settings, including Allergies, Diagnoses, Equipment, Evacuation, and Diets. Any time a list entry is created, updated (including name, type/code, or status changes), or removed, an activity record is generated. Results are visible in both Organization and Community Activity Tracking listings.

Community Settings

Changes made within Community Settings are now fully tracked. This includes updates to the community Profile, Contact information, Apps (enabling or disabling), Features, Integrations, NJ Interoperability configuration, and Preferences such as Time Zone, Units of Measure, and ICD10 list selection. Activity entries capture who made the change, what changed, and the old and new values. Results appear in Organization and Community Activity Tracking listings.

ElderForms

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Activity Tracking now covers changes made within ElderForms configuration — including creating, editing, enabling/disabling, and deleting Documents and Packets, as well as changes to document-to-packet assignments. Results are visible in Organization and Community Activity Tracking listings.

CRM Integrator Configuration

CRM Integrator Update activity is now included in Activity Tracking. Administrators and support staff can see a record of changes made to CRM integrator configuration — including when records were created, updated, or deleted — making it easier to audit activity and troubleshoot issues.

Activity Tracking Improvements

Record Name Added to Details Card

The Activity Tracking Details card now displays a Record Name field below Record Type, providing more specific context about which record was affected by a given activity. This improvement applies at the Organization, Community, and Resident levels.

Activity		
Details		
Community Red-Door House	Community ID 7f29a054-2d83-4043-9f74-2d81d535abde	Date/Time 06/15/2026 02:16:45 PM (CT)
Event ID a6daec5f-62c7-416f-aa5e-58955a7e1ba1	Process Create	Record ID 83d7097a-81eb-4254-a81b-283e3f8e8b42
Record Type Resident Census History	Related Record ID f749c439-329f-4ba5-bc24-27202f32a6f5	Related Record Type Resident
Record Name AL	User mkern@jasper	User ID 8bbf125e-0e0b-4d62-adf5-620d464c6467

Loading Indicator on Logins Tab

The Activity Tracking Logins tab now displays a loading indicator while data is being retrieved, replacing the previous blank-screen behavior. Once loaded, the data appears normally. If no records are found, a standard empty-state message is shown. This improvement applies at both the Organization Admin and Community Settings levels.

Activity			
Date/Time (CT)	Process	Record Type	Username
Loading			

What This Means

- Administrators have a more complete audit trail across resident records, system lists, community configuration, and ElderForms setup.
- The Record Name field makes it faster to identify which specific record was changed without additional investigation.
- The Logins tab now behaves consistently with other listing pages, reducing confusion when data takes time to load.

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Activity Tracking: Login History Improvements

The Login Activity Tracking feature has been updated to address reliability issues and improve the accuracy of login records. These improvements apply at both the Organization and Community levels.

What's New

More Reliable Login Records

The underlying approach to capturing login events has been rebuilt to be more consistent and accurate. Login activity now records correctly across a broader range of sign-in scenarios that were previously missed or inconsistently tracked.

Deleted Users Now Display by Name

Login records associated with users who have since been removed from the system previously displayed as "Unknown User" in the listing. Those records now show the user's first and last name, preserving a complete and readable audit trail even after a user account has been deleted.

Important Note: Historical Login Data

As part of this update, login records captured prior to this release will no longer be visible in the Login Activity Tracking table. Historical login data is retained and can be provided upon request. Please contact Eldermark Support if you need access to login records from before this release.

What This Means

- Login history is more complete and accurate, giving administrators a more reliable record of who accessed the system and when.
- Audit trails remain readable after staff turnover — login entries from former users show the person's name rather than a generic placeholder.
- Pre-release login data is not lost — it is available by contacting Eldermark Support.

Resident Insurance: Public Health Enhancements

Two updates have been made to how Public Health insurance records are managed on the Resident Profile. These changes improve data integrity and align the insurance workflow with billing requirements.

Navigation: Clinical → Residents → Resident Record → Profile → Insurance

What's New

One Public Health Record Per Resident

Public Health is now limited to one record per resident. When a resident already has a Public Health insurance record on file, the Public Health option will no longer appear in the Coverage dropdown when adding a new insurance record. This prevents duplicate Public Health entries from being created.



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If the existing Public Health record is deleted, the option becomes available again in the dropdown. All other coverage types — such as Health and Dental — are unaffected by this change and continue to follow existing behavior.

Medicare or Medicaid ID Required for Public Health Records

When creating or editing a Public Health insurance record, at least one of the following fields must now be populated before the record can be saved:

- **Medicaid #** — Medicaid identification number
- **Medicare #** — Medicare identification number

If both fields are left blank, the save action is blocked and an error message is displayed prompting the user to enter at least one identifier. Entering only one field is sufficient to save. This validation applies to both new records and edits to existing records.

What This Means

- Duplicate Public Health records can no longer be added to a resident's insurance profile.
- Public Health records must include a Medicaid or Medicare ID, ensuring records are complete and usable for billing and reporting.
- If a Public Health record needs to be replaced, the existing record must be deleted first — the coverage option will then become available again.
- Existing records with both ID fields blank can still be viewed, but will require at least one identifier to be entered if edited and re-saved.

Default Time for Admit, Occupancy, Discharge, and Readmit

Time fields across key resident workflows now default to 12:00 AM when a form is opened, eliminating the need to manually enter a time in situations where only the date matters. Users can still adjust the time as needed.

What's New

12:00 AM Default Across Workflows

The following time fields now pre-populate with 12:00 AM when a new form is opened or a new record is being created:

- **Admit Time** — New Resident and Readmit workflows
- **Move In Time** — New Resident workflow
- **Start Time** — Occupancy / Unit Assignment
- **End Time** — Occupancy / Unit Assignment (where applicable)
- **Discharge Time** — Discharge workflow

The default time is based on the community's configured time zone, not the browser's local time zone.

Behavior Details

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- The time field is pre-filled but remains fully editable — users can change it at any point before saving.
- If a user clears the time field, it resets to 12:00 AM.
- Changing the date does not reset the time — the two fields are independent.
- When editing an existing saved record, the previously saved time is preserved. The 12:00 AM default only applies to new records or newly cleared fields.

What This Means

- Staff can complete high-frequency workflows — admissions, discharges, transfers — with fewer clicks when the exact time is not relevant.
- Time fields will no longer be left blank by accident, reducing the risk of incomplete records.
- Existing records are not affected — saved times remain unchanged.

Clinical Fixes

The following issues have been resolved in this release.

- **Adding a medical provider or care team member to a resident record** — An issue prevented users from opening the New modal when adding a provider to the Care Team section of a resident's medical record. The form now opens and saves as expected.
- **Funeral Home contact details not appearing on the Agencies card** — When a Funeral Home was added to a resident's profile, the address and phone number configured in Settings were not displaying on the resident's Agencies card. Only the name and note fields appeared. Both fields now display correctly.
- **Printed Facesheet missing Care Team information** — The printed Facesheet did not consistently include all medical contacts associated with a resident. The Facesheet now pulls all Care Team members and displays full contact details — including name, specialty, organization, phone, fax, and address — for each provider on file.
- **Incorrect care service times displayed on mobile devices** — On narrow-screen devices such as phones, scheduled care service times were displaying with the wrong hour (showing 8:xx PM regardless of the actual scheduled time), while the minutes were correct. Service times now display accurately at all screen sizes.
- **Private units not appearing in Manage Units selection** — Private units that had disabled sub-units were not appearing in the unit selection panel under Manage Units, making it impossible to reassign those units. Enabled private units now appear correctly in the selection list regardless of their sub-unit status.
- **Services duplicating when using Copy Forward on an evaluation** — When an evaluation was completed using the Copy Forward function, services were being added twice to the resident's service plan — creating duplicate active records even when plan limits were set to one per service category. Services from Copy Forward evaluations are now applied without duplication.



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- **Unit station changes not reflecting on sub-units or the unit listing** — When a station was updated on a parent unit, the change was not being applied to its sub-units or reflected in the unit listing screen. Residents in those sub-units were being routed to the incorrect station. Station updates on a parent unit now apply consistently to all associated sub-units and display correctly throughout the system.

Integrator API Updates

This release includes significant expansions to the Eldermark NEXT Integrator API, adding new endpoints and enriching existing responses with additional data. These updates enable integrators to synchronize more clinical and resident data and reduce manual reconciliation between systems.

New Endpoints

POST Resident Vitals

A new endpoint allows integrators to submit vitals directly into a resident's clinical record. Vitals can be submitted individually or together in a single request and are stored as historical entries — prior records are never overwritten. Supported vitals include:

- **Blood Pressure** (systolic/diastolic)
- **Heart Rate** (beats per minute)
- **Respiration** (breaths per minute)
- **Temperature** (Fahrenheit or Celsius)
- **Height and Weight** (imperial or metric — automatically converted to the community's configured measurement standard)
- **Oxygen Saturation, Pain Level, Blood Glucose, and INR**

All vitals are validated before any data is saved. If any individual vital fails validation, the entire submission is rejected and no data is stored — preventing partial entries. BMI is derived automatically from height and weight and cannot be submitted directly.

POST Resident Allergies

Integrators can now create and update resident allergy records via API. Each submission supports allergy name, type (Food, Environmental, or Drug), severity, and reaction. The endpoint uses case-insensitive name matching — if an allergy already exists, the severity and reaction are updated rather than creating a duplicate. Only active allergens are updated; if no active match exists, a new record is created.

GET Resident Enhancements

Resident Unit History

The GET Resident endpoint now supports an `include=unit_history` parameter, returning a full chronological record of the resident's unit assignments. Each entry includes unit name, privacy type, station, care level, occupancy start and end dates, transfer flags, scheduled move-in and move-out dates, and reservation details. This gives integrators a complete view of a resident's housing timeline for reporting and billing reconciliation.



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Resident Contact Data (Individual ID and Notes)

The GET Resident by ID response now includes the Individual ID and note field for each associated contact. Previously, the contact Individual ID was not returned, making it impossible to reliably match contacts in external systems when names changed. Both the ID and note are now included in the contact object for every contact on the resident record.

Legacy ID Included in Resident Responses

Both the GET Resident list and GET Resident by ID endpoints now return a legacyId field on each resident record. This allows integrators to cross-reference Eldermark Legacy resident IDs with Eldermark NEXT IDs during and after migration, eliminating the need for manual mapping. If no legacy ID exists for a resident, the field returns null.

Selectable Data Domains on GET Resident List

The GET Resident list endpoint now supports an include query parameter, allowing integrators to request only the data domains they need. Supported domains include demographics, census, medical records, care planning, SSN, and allergens. Multiple domains can be requested in a single call, and paging is supported. If a requested domain is not within the integrator's permissions, it is excluded from the response with a warning in the meta field rather than returning an error.

Other API Updates

GET Allergies: All Allergy Types Now Returned

The GET Allergies endpoint previously returned Food allergens only. It now returns all allergy categories — Food, Environmental, and Drug — and includes an allergy type field on each record. The response also includes allergy ID, name, severity, reaction, and status. Existing integrations are not affected; the expanded response is additive.

POST Resident: Duplicate Match Returns Existing Resident ID

When a POST Resident request is rejected because a matching resident record already exists, the API now returns a structured 409 Conflict response that includes the existing Resident ID and identifies which field triggered the match (such as SSN, name and date of birth, or email). Integrators can use the returned ID to link their external system to the existing record and continue sending updates, evaluations, or reservations without disruption.

What This Means

- Integrators can now submit clinical vitals directly through the API, keeping resident health data synchronized without manual entry.
- Allergy data — across all types — can be created, updated, and retrieved through the API, with duplicate protection built in.
- Resident responses are significantly richer: unit history, contact IDs, contact notes, and legacy IDs are all now accessible without additional workarounds.
- The GET Resident list is more flexible, allowing integrators to pull only the data domains they need in a single paged request.

Duplicate resident detection now returns actionable information, enabling integrators to recover and continue their workflow without manual intervention.

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EMAR

Mobile Navigation Improvements

This release introduces the first in a series of improvements to the EMAR experience on mobile devices. Med Managers can now access additional EMAR workflows directly from a phone or tablet, without requiring a desktop or laptop.

What's New

Additional Navigation Links on Mobile

Two navigation destinations are now accessible when using EMAR on a mobile device:

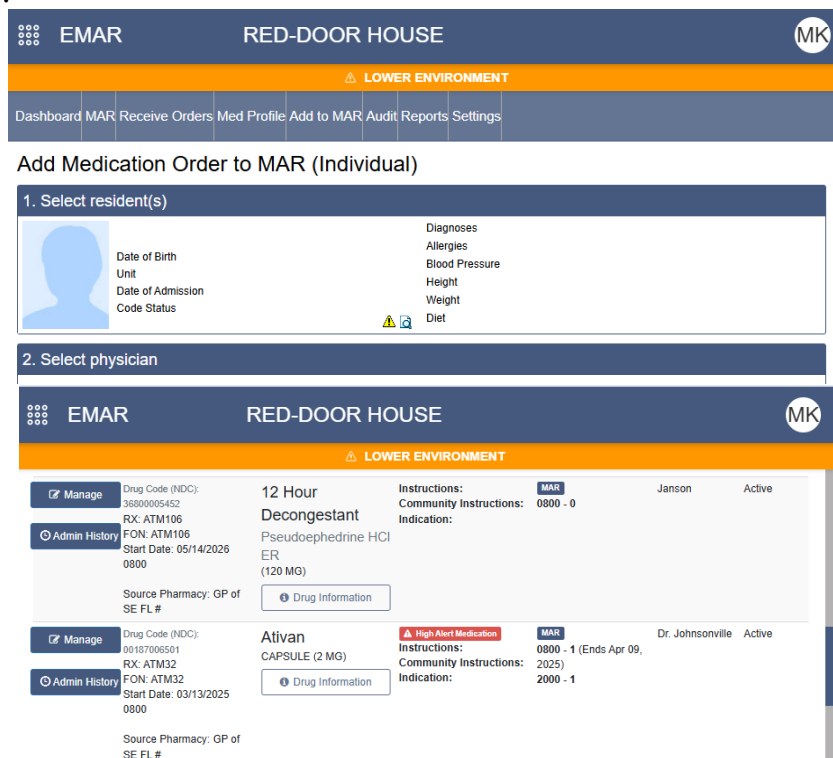
- **Medication Profile** — navigate directly to the Orders > Medication Profile page.
- **Add to MAR/TAR** — navigate directly to the Orders > Add to MAR/TAR page.

Scrollable Navigation Bar

The mobile navigation bar now supports horizontal scrolling when navigation options extend beyond the visible screen width, keeping all menu items accessible without losing links off-screen.

Important Note: Use Landscape Orientation

For the best experience when using EMAR on a phone or tablet, rotate your device to landscape (horizontal) orientation. This provides more visible screen space for both the navigation bar and EMAR content. Additional mobile usability improvements are planned for upcoming releases.



What This Means

- Med Managers and above can now access Medication Profile, and Add to MAR/TAR from a mobile device — completing more of their daily workflow without switching to a desktop.

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- All EMAR navigation options remain accessible on mobile, with the nav bar scrolling horizontally when needed.
- This is the first step in an ongoing series of EMAR mobile improvements. More updates are coming in future releases.

Schedule Preview Accuracy for Duration-Based Orders

The Schedule Preview on Receive Orders now accurately reflects how the system will adjust start and end dates when receiving an order with a past start date. Med Managers can see the actual schedule that will be created before confirming receipt, eliminating guesswork about what dates will be applied.

What's New

Auto-Adjusted Dates Shown in Preview

When the EMAR setting Start new orders from current datetime is enabled and an incoming order has a start date in the past, the system automatically moves the start date forward. If the order also has a Duration value, the end date is recalculated from the adjusted start date using that duration.

The Schedule Preview now reflects these adjustments before the order is received. The preview shows the schedule exactly as it will be created — with the updated start date and the recalculated end date — rather than the original dates from the order.

Explicit End Dates Respected

When an order has an explicit end date set by a user or sent by the pharmacy, the Schedule Preview continues to show only occurrences up to that end date. The explicit end date is not recalculated or adjusted — it is honored as set.

What This Means

- Med Managers can confirm the exact schedule that will be created before receiving an order.
- For orders with a Duration, the preview accounts for the auto-adjusted start date and shows the correct end date based on that duration.
- Explicit end dates set by a user or pharmacy are displayed and respected as-is in the preview.

Medication List Added to Forms Backup

The Medication List report is now included in the EMAR Forms Backup scheduled job. This ensures that a copy of each resident's medication list is available — even if the EMAR service is temporarily offline — so staff can continue referencing medication information and administering safely without interruption.

What's New

Medication List Included in Scheduled Backup

The Forms Backup scheduled job now generates a Medication List report using default parameters for all active EMAR communities. The report is produced automatically on

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schedule alongside other backed-up forms and is accessible in the event EMAR is unavailable.

What This Means

- Staff have access to a recent copy of resident medication profiles during any EMAR service interruption.
- The Medication List is generated automatically — no manual action is required to produce or maintain the backup.
- Medication administration can continue safely using the backed-up report when online access is not available.

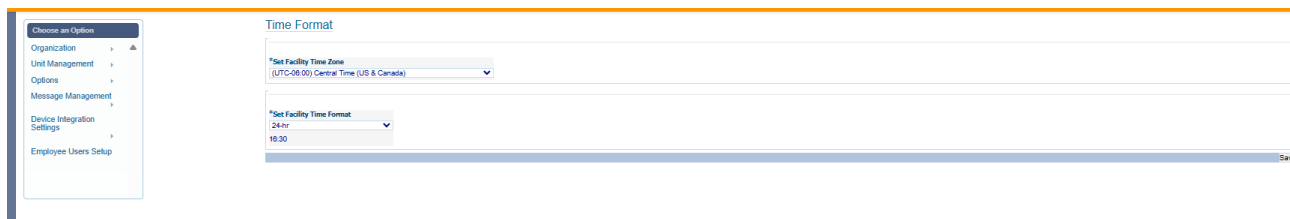
12-Hour Time Format Support

EMAR now supports a configurable time format at the community level. Communities can choose to display times in 12-hour (AM/PM) or 24-hour format throughout the application — on screens, time entry fields, and printed reports — so staff see times in whichever format they are most comfortable with.

Community Time Format Setting

A new Time Format setting is available in EMAR Settings. Community Managers can set the preferred format to 12-hour or 24-hour. The page includes a live preview of the selected format so the display style is clear before saving. The default setting is 24-hour, so communities that have not configured this setting will see no change in behavior.

Navigation: EMAR → Settings → Facility → Time Format



Where the Setting Applies

EMAR Screens

Once the community time format preference is set, times are displayed accordingly across all major EMAR screens and modals, including:

- **Dashboard** — all widgets

Unit	Resident	Order	Scheduled Date/Time	Overdue
02	Holzworth, Katherine	12 HR Mucus Relief Max	09/15/2026 08:00 AM	6 hours
02	Holzworth, Katherine	Katies Medication Communication	09/15/2026 08:00 AM	6 hours
02	Holzworth, Katherine	Lopressor	09/15/2026 08:00 AM	6 hours
02	Holzworth, Katherine	Warfarin Sodium	09/15/2026 08:00 AM	6 hours
09	Friescho, Esther	Lopressor	09/15/2026 08:00 AM	6 hours
04	Anderson, Donna	12 Hour Decongestant	09/15/2026 08:00 AM	6 hours
12	Bennette, Bonita	Acetaminophen	09/15/2026 08:00 AM	6 hours
14 - A	Meta, Muoi	Advil	09/15/2026 08:00 AM	6 hours
04	Hedman, Heidi	Metoprolol Tartrate	09/15/2026 08:00 AM	6 hours

- **MAR and TAR** — Pass listings, resident cards, medication rows, administration history, bio tests, follow-up notes, warnings and alerts

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Medication Passes for Monday, June 15, 2026

← Previous Day June 15, 2026 Next Day → Station: All Stations

Hotlist Available PRNs for All Residents LOA for All Residents

Time Period	Status	Medication	Resident
Morning (07:00 AM - 10:59 AM) - Incomplete	Scheduled	15 Medication	9 Resident
	Administered	0 Medication	0 Resident
	Overdue	15 Medication	9 Resident
	Not Administered	2 Medication	2 Resident
	Alternative Administration	0 Medication	0 Resident
Mid Day (11:00 AM - 03:59 PM) - Due Now	Scheduled	0 Medication	0 Resident
	Administered	0 Medication	0 Resident
	Overdue	9 Medication	9 Resident
	Not Administered	2 Medication	2 Resident
	Alternative Administration	0 Medication	0 Resident
PM (04:00 PM - 07:59 PM) - Scheduled	Scheduled	0 Medication	0 Resident
	Administered	5 Medication	0 Resident
	Overdue	0 Medication	0 Resident
	Not Administered	2 Medication	2 Resident
	Alternative Administration	1 Medication	1 Resident
Bedtime (08:00 PM - 11:59 PM) - Scheduled	Scheduled	0 Medication	0 Resident
	Administered	0 Medication	0 Resident
	Overdue	0 Medication	0 Resident
	Not Administered	1 Medication	1 Resident
	Alternative Administration	0 Medication	0 Resident

← Back to All Passes

MED Pass Mid Day (11:00 AM - 03:59 PM) on Monday, June 15, 2026 - Scheduled

Hotlist Available PRNs for All Residents LOA for All Residents

Find a resident Sorted by Room and Bed

<p>Holzworth, Katherine Unit: 02 Code Status: Resuscitate Due at: 12:00 PM</p>	<p>Frescho, Esther Unit: 09 DOB: 08/14/1943 Code Status: Resuscitate Due at: 12:00 PM</p>	<p>Larson, Mike Unit: 11 Code Status: Resuscitate Due at: 02:00 PM</p>
<p>Bennette, Bonita Leigh Unit: 12 DOB: 01/03/1956 Code Status: Resuscitate Due at: 12:00 PM</p>	<p>Meta, Mucil Unit: 14 - A Code Status: Resuscitate Due at: 12:00 PM</p>	<p>Blackhart, Hudson Unit: 19 Code Status: Resuscitate Due at: 12:00 PM, 01:00 PM, 02:00 PM</p>

Blackhart, Hudson Unit: 19 Code Status: Resuscitate

- Allergies: DRUG: Ace Inhibitors - MODERATE -
- Diagnoses: Abdominal actinomycosis
- Diet: Likes, Dislikes, Dairy Free, Consistent Carb

MED Pass Mid Day (11:00 AM - 03:59 PM) on Monday, June 15, 2026 - Scheduled

Hotlist Available PRNs for All Residents LOA for All Residents

ORDER: Ted Socking put away. Due at 01:00 PM

Completed Due at 01:00 PM (Conditions: 0)

Not Completed Due at 01:00 PM

Acetaminophen 2 TABLET(500 MG) Due at 12:00 PM

Take TWO tablets FOUR times a day. Last Given: 04/30/2026 07:57 PM

Sign as Late Administration Late - Due at 12:00 PM (Conditions: 3)

Sign as Not Administered Due at 12:00 PM

- **Orders** — Receive Orders, Medication Profile, Add to MAR/TAR, Add to MAR/TAR Batch, MAR/TAR Notes, and their Custom Cycle windows

Blackhart, Hudson Unit: 19 Code Status: Resuscitate

- Allergies: DRUG: Ace Inhibitors - MODERATE -
- Diagnoses: Abdominal actinomycosis
- Diet: Likes, Dislikes, Dairy Free, Consistent Carb

Acetaminophen 2 TABLET(500 MG) Take TWO tablets FOUR times a day

First Schedule Date: 02/11/2026 12:00 PM

08:00 AM - 2
12:00 PM - 2
04:00 PM - 2
08:00 PM - 2

Last Updated: Feb 11 2026 at 11:18 AM by mkern@geldermarkuat [View History](#)

Preview Schedule [Edit](#)

Month	Day	Time	Medication	Resident
May 2026	Sun	01	S2	S2
Jun 2026	Mon	02	S2	S2
Jun 2026	Tue	03	S2	S2
Jun 2026	Wed	04	S2	S2
Jun 2026	Thu	05	S2	S2
Jun 2026	Fri	06	S2	S2
Jun 2026	Sat	07	S2	S2
Jun 2026	Sun	08	S2	S2
Jun 2026	Mon	09	S2	S2
Jun 2026	Tue	10	S2	S2
Jun 2026	Wed	11	S2	S2
Jun 2026	Thu	12	S2	S2
Jun 2026	Fri	13	S2	S2
Jun 2026	Sat	14	S2	S2
Jun 2026	Sun	15	S2	S2
Jun 2026	Mon	16	S2	S2
Jun 2026	Tue	17	S2	S2
Jun 2026	Wed	18	S2	S2
Jun 2026	Thu	19	S2	S2
Jun 2026	Fri	20	S2	S2
Jun 2026	Sat	21	S2	S2
Jun 2026	Sun	22	S2	S2
Jun 2026	Mon	23	S2	S2
Jun 2026	Tue	24	S2	S2
Jun 2026	Wed	25	S2	S2
Jun 2026	Thu	26	S2	S2
Jun 2026	Fri	27	S2	S2
Jun 2026	Sat	28	S2	S2
Jun 2026	Sun	29	S2	S2
Jun 2026	Mon	30	S2	S2

[Cancel](#)

- **Settings** — EMAR Frequency and Passtime configuration

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Time Entry Fields

When the community preference is set to 12-hour format, time input fields across EMAR screens display with an AM/PM selector. Staff can enter times using familiar 12-hour notation — the system handles the conversion to 24-hour format for storage automatically. If a time between 13:00 and 23:00 is entered in 24-hour format, PM is selected automatically. All times continue to be stored internally in 24-hour format regardless of the display setting.

Printed Reports

The following EMAR reports now display times in the community-preferred format:

- Physician Order Sheet
- Medication Administration Record
- Medication Administration Record (Individual)
- Medication List
- PRN Administration History
- PRN Orders

Audit Log

Audit log comments are generated and stored at the time of the event. Historical audit comments are not changed by this setting. New audit entries reflect times consistently with the existing display behavior.

What This Means

- Communities can now choose the time format that works best for their staff — 12-hour or 24-hour — and have that preference applied consistently across EMAR.
- Staff entering times in EMAR see input fields that match their preferred format, reducing the risk of AM/PM errors.
- Printed reports now match the on-screen time format, so what staff see in the application matches what they hand off on paper.
- No data is changed — all times continue to be stored in 24-hour format. The setting affects display only.
- Communities that do not update the setting will continue to see 24-hour format as before.

EMAR Fixes

This release includes a number of targeted improvements to EMAR workflows based on issues reported. The items below address problems that affected daily medication administration, order visibility, documentation accuracy, and form readability.

- **Self admin orders now route correctly from the first scheduled occurrence.** When an order was set to Self Admin during the receive process, the first scheduled occurrence would appear in the standard Scheduled pass instead of the Alternative Admin pass. All self admin order schedules now appear in the correct Alternative Admin section of the pass from the moment the order is received.
- **Self admin badge now displays consistently on the Medication Profile.** Self admin orders were not displaying the Self Admin badge on the Medication Profile, and those



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orders would not appear when filtering by Self Admin. The badge and filter now reflect the self admin status correctly after receiving an order.

- **Order creation is more reliable for pharmacy-sent orders.** A time format processing issue was causing errors during order creation when pharmacy orders were sent to EMAR. Orders are now created reliably and order history is recorded correctly.
- **Early administration audit events are no longer generated for on-time administrations.** Medications administered within the scheduled passing window were incorrectly generating Early Administration audit entries, creating inaccurate audit records. Audit entries of this type are now only generated when a medication is actually administered outside the passing window.
- **PRN orders return to the pass immediately when supply status is removed.** After removing the supply designation from a PRN order, the order was not appearing in the med pass or the Available PRNs modal until the following day. Removing the supply status now makes the PRN available in the current med pass without waiting for the next day.
- **PRN protocol non-medication interventions are now required before administration.** When a PRN order had a Non-Medication Intervention configured in its PRN Protocol and was flagged as Psychotropic, it was possible to administer the medication without completing the required intervention documentation. The intervention prompt now appears before the administration panel can be opened, as required by the protocol.
- **Orders with a Duration no longer disappear after the start date is adjusted.** When the community setting to start new orders from the current date and time is enabled, receiving an order after its original start date would cause the system to advance the start date without recalculating the end date. This resulted in orders with an end date before the start date, making them invisible on the Medication Profile and in Receive Orders. The end date is now recalculated based on the Duration when the start date is adjusted.
- **Forms Backup now produces readable documents.** Forms generated by the Forms Backup program were occasionally displaying unreadable characters in documentation fields, making backed-up forms unusable. Backed-up forms now display text correctly.

ElderSmarts: New Clinical and Incident Reporting Dashboards

This release adds four new reporting enhancements to ElderSmarts, giving care teams and leadership greater visibility into resident health trends, incident patterns, and clinical alerts — all in one place. Data is available at the community, regional, and executive level based on each user's access.

Clinical Alerts Dashboard

A new Clinical Alerts dashboard surfaces residents with readings that fall outside of defined thresholds, making it easier for care teams to identify residents who may need timely attention. Four alert types are included:

- **Oxygen Saturation** — residents with O₂ saturation below 90%, with community, resident name, unit, reading, and date/time.

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- **Temperature** — residents with a temperature of 99.0 degrees F or above, with community, resident name, unit, reading, and date/time.
- **Blood Sugar** — residents with blood sugar below 100 or above 350, with community, resident name, unit, reading, and date/time.
- **Weight Change** — residents with a weight change of 4% or more over the last 45 days, categorized by severity: Low (4-5%), Medium (6-9%), and High (10%+).

Clinical Alerts

Blood Sugar alerts are values below 100 or above 350 / O2 Saturation alerts are values less than or equal to 90 / Temperature alerts are values greater than 99.

Report Help

Date: Select date range | Alert Type: Select values | Community: Select values | Region: Select values | Resident Name: Select values

Community	Resident Name	Unit	Alert Type	Value	Date	Time
Red Door House	Bennette, Bonita Leigh	12	O2 Saturation	86	07/14/2025	3:41 AM
Red Door House	Bennette, Bonita Leigh	12	Temperature	99.8	07/13/2025	3:37 AM
Red Door House	Frescho, Esther	09	O2 Saturation	12	08/28/2025	8:28 AM
Red Door House	Holly, Houston	08	O2 Saturation	15	12/12/2025	2:23 AM
Red Door House	Holtzworth, Katherine	02	Blood Sugar	77	08/29/2025	11:45 AM
Red Door House	Holtzworth, Katherine	02	O2 Saturation	89	09/02/2025	3:46 AM
Red Door House	Holtzworth, Katherine	02	Temperature	100	09/02/2025	3:46 AM
Red Door House	James, Jessica	15	Blood Sugar	17	11/14/2025	9:00 AM
Red Door House	James, Jessica	15	O2 Saturation	14	11/14/2025	8:59 AM
Red Door House	Jones, Oscar	13	Blood Sugar	18	11/14/2025	12:07 PM
Red Door House	Jones, Oscar	13	O2 Saturation	15	11/14/2025	12:07 PM
Red Door House	Larson, Mike	11	Blood Sugar	25	11/14/2025	8:40 AM
Red Door House	Larson, Mike	11	O2 Saturation	23	11/14/2025	8:40 AM
Red Door House	Peterlen, Iola	03	O2 Saturation	89	11/18/2024	2:03 AM
Red Door House	Peterlen, Iola	03	O2 Saturation	14	11/19/2025	10:20 AM
Red Door House	Smith, Jane	04	Blood Sugar	86	01/28/2026	1:42 AM

18 rows - 7 columns

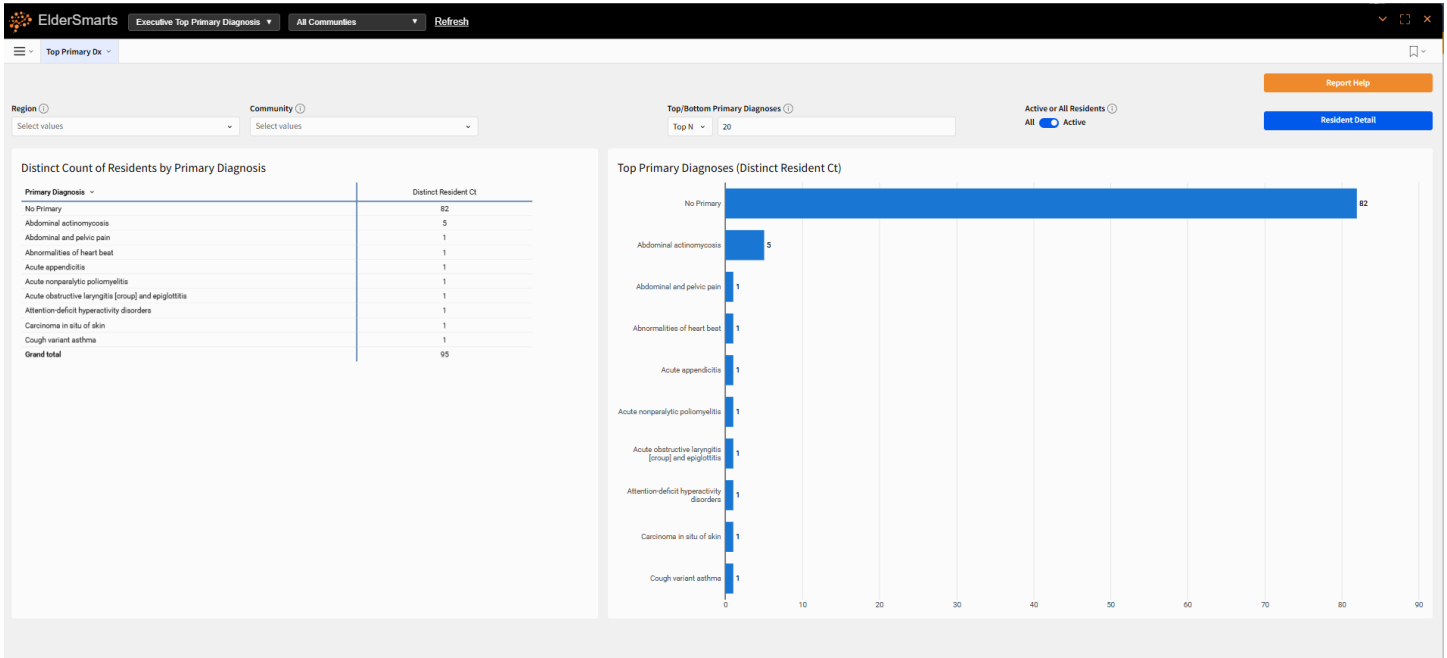
Oxygen, temperature, and blood sugar alerts can be filtered by daily, weekly, or monthly time ranges. Clicking any alert opens a drilldown view with resident-level detail. Data can be exported for reporting purposes. Only currently admitted residents not on a leave of absence are included.

Top Primary Diagnoses

A new bar chart widget shows the most common primary diagnoses across the resident population. Staff can quickly see which health conditions are most prevalent and click any diagnosis to view a list of the residents with that diagnosis, including their unit and community.



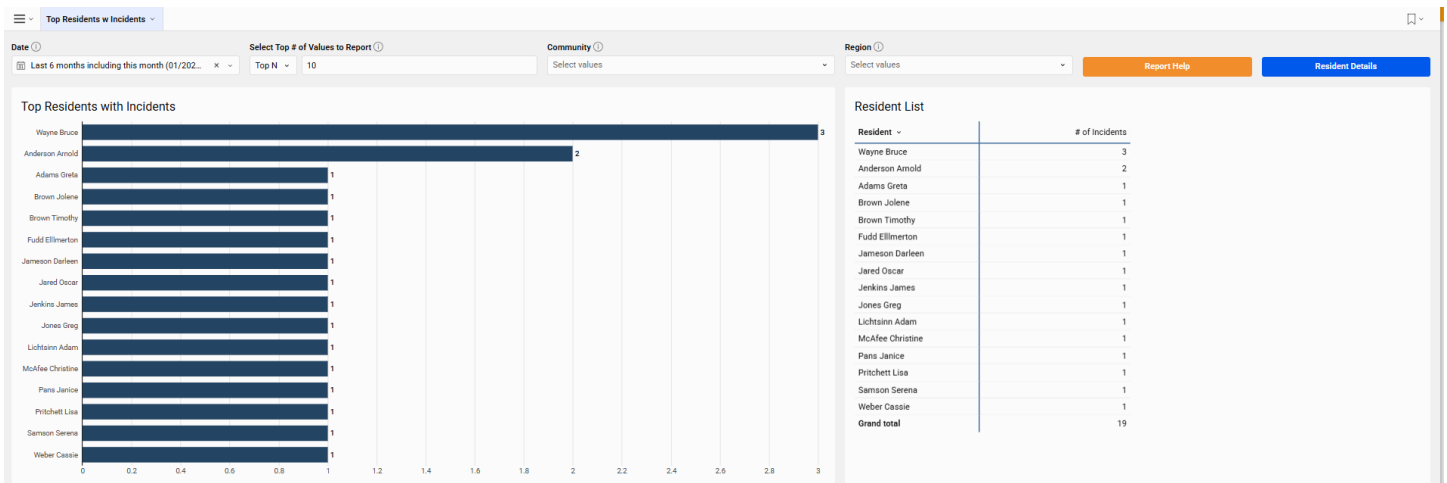
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Top Residents with Incidents

A new dashboard ranks residents by number of incidents within a selected time period. The bar chart and accompanying table display resident name, community, and incident count, making it straightforward to identify residents who may benefit from reassessment or additional support. Clicking a resident opens a drilldown table with details on each individual incident, including type, reason, date, time, and whether the incident was a sentinel event.

Incident data is drawn from both Legacy and NEXT systems. The date range and Top N count can be adjusted using filters.



Incidents List: Unified View Across Legacy and NEXT

The Incidents List report now combines incident records from both Legacy and NEXT into a single view. A new Source column on each row indicates whether the incident originated in

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Legacy or NEXT, so the origin of each record is always clear. All existing filters apply across both data sources, and a Source filter allows users to narrow results to one or both systems. PDF and Excel exports include the Source column and reflect all active filter selections.

Incidents List

Incident Date: [Select date range] Source: [Select values] Community: [Select values] Type: [Select values] Initial Locked: (2) True, False Incident Reason: [Select values] Resident: [Select values]

Reported By: [Select values] Investigation Signer: [Select values]

Community	Resident	Incident Date	Type	Incident Reason	Sentinel Event	Source	Initial Locked	HSD Signature	ED Signature	Investigation Signer	Investigation Sign Date	Reported By
Centennial Club	Adama Greta	05/05/2025	Medication	Wrong drug administration	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	05/05/2025	Toy, Siera
Centennial Club	Jamerson Darleen	05/05/2025	Resident	Abrasion	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	05/05/2025	Toy, Siera
Centennial Club	Miller Howard	12/08/2025	Medication	Wrong route of administration	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	12/08/2025	Toy, Siera
Centennial Club	Kaupen Mindy	12/08/2025	Medication	Incorrect time of administration	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	12/08/2025	Toy, Siera
Centennial Club	Evana Dianna	07/08/2025	Resident	Laceration	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	07/11/2025	Toy, Siera
Centennial Club	Evana Dianna	07/11/2025	Medication	Wrong route of administration	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	07/11/2025	Toy, Siera
Centennial Club	Biga Frank	11/12/2025	Medication	Incorrect dosage	Yes	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	11/12/2025	Toy, Siera
Centennial Club	Kaupen Mindy	12/04/2025	Resident	Other	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	12/04/2025	Toy, Siera
Centennial Club	Jensen Kenneth	10/06/2025	Medication	Incorrect time of administration	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	10/06/2025	Toy, Siera
Centennial Club	Jensen Kenneth	10/02/2025	Resident	Suspected physical abuse	No	NEXT	True	Toy, Siera	Toy, Siera	Toy, Siera	10/06/2025	Toy, Siera
Red Door House	Jenkins James	05/08/2025	Medication	Stock inadequate	No	NEXT	True	Kern, Myriah	Kern, Myriah	Kern, Myriah	05/09/2025	Kern, Myriah
Red Door House	Frescho Esther	04/12/2025	Resident	Suspected physical abuse	No	NEXT	True	Kern, Myriah	Kern, Myriah	Kern, Myriah	04/12/2025	Kern, Myriah
Red Door House	Frescho Esther	05/08/2025	Resident	Suspected physical abuse	Yes	NEXT	True	Kern, Myriah	Kern, Myriah	Kern, Myriah	05/09/2025	Kern, Myriah

What This Means

- Care teams have a faster way to spot residents with out-of-range vital signs or significant weight changes — without manually running individual reports.
- Leadership can see which diagnoses are most common across the resident population, informing care planning and resource allocation.
- Communities transitioning from Legacy to NEXT can review incidents from both systems in one place, with no loss of historical data visibility.
- Identifying residents with repeat incidents is now a dashboard view rather than a manual process, supporting proactive intervention.

