

Revised CMS Critical Access Hospital (CAH) Conditions of Participation 2017: *Ensuring Compliance*

March 2-3, 2017 • Hilton Garden Inn Northeast • Louisville, Kentucky

Overview

Did you know about a third of the manual was updated April 7, 2015? This includes rewriting the section on nursing, drugs and biologicals, pharmacy, dietary, infection control, lab, radiology, contracted services and adding the rehab section, IV medication, safe opioid use and blood. This three part program will include information on the entire manual.

There are also many proposed changes in 2017 including rewriting the discharge planning standards. Proposed changes in 2017 in the Hospital Improvement Act will require an antibiotic stewardship program and changes in infection control, nursing, medical records, QAPI and more. New regulations were issued on emergency preparedness and the new interpretive guidelines should be out in 2017.

CAHs hospitals must comply with the Centers for Medicare & Medicaid Services' CoP for Critical Access Hospitals. The CMS regulations and interpretive guidelines serve as the basis for determining compliance and this manual will be discussed in detail as well as both the new and proposed changes. Attendees will learn details about the CoPs and what to do when a surveyor arrives at your facility. Every section on the CAH hospital manual will be covered in this day and one-half program.

Revised changes were made to direct services required, policies, outpatient, rehab, radiology, services required, equipment maintenance, qualified personnel, radiology records, emergency services, radiology safety, required lab tests and more.

CMS has issued many important hospital memos including privacy and confidentiality which are especially important in light of HIPAA and the substantial penalties seen recently. Other memos include humidity in the OR, Effects of Humidity, CRE and scopes, insulin pens, safe injection practices, reporting to the PI program, complaint manual update, OPO contracts, telemedicine and EMTALA, equipment and maintenance, disaster preparedness, and deficiencies for CAHs.

CMS received a \$50 million dollar grant a number of years ago to enforce infection control standards and some hospitals are reporting increased scrutiny of these standards since surveyors are more knowledgeable. CMS is also planning infection control inspections of U.S. hospitals. While CMS will not be using the infection control worksheet at CAHs, this program will discuss why it is important to be aware of what is in this worksheet. There is also a final and revised worksheet on discharge planning and QAPI.

This seminar will help CAHs comply with specific CoP problem areas, including nursing care plans, legibility requirements, necessary policies and procedures, nursing medication carts, drug storage, informed consent, history and physicals, verbal orders, medication administration, security of medications, protocols, standing orders and emergency preparedness. There are many pharmacy standards and medication-related sections that will be covered in detail. Every tag section in the regulations and interpretive guidelines also will be covered. Attendees will learn details about the CoPs and what to do when a surveyor from arrives at your facility.

Objectives

At the conclusion of part one, participants should be able to:

- Describe that CMS requires the board to enter into a written agreement if the hospital wants to enter into a telemedicine services
- Discuss that CMS has a list of emergency drugs and emergency equipment that every CAH must have
- Recall that the length of stay in the CAH should not exceed 96 hours on an annual average basis
- Discuss recommendations to do a gap analysis to ensure compliance with all the hospital CoPs
- Recall that hospitals must have a visitation policy and patients must be informed
- Recall that many sections of the manual were rewritten in 2015 including nursing, dietary, drugs and biologicals, rehab, pharmacy, and infection control
- Explain the responsibilities of the pharmacists that include developing, supervising, and coordinating activities of the pharmacy
- Describe the requirements for CAH to monitor and inspect to ensure that outdated drugs are not available for patient use
- Recall the requirements for security and storage of medications, medication carts and anesthesia carts

- Discuss the requirement to have a list of do not use abbreviations and a review of sound alike/look alike drugs
- Explain the informed consent elements required by CMS
- Describe the requirements for history and physicals for CAH
- List what must be contained in the operative report
- Discuss what the CAH must do to comply with the requirements for notification of the organ procurement (OPO) agency when a patient expires
- Recall that CMS has many patient rights that are afforded to patients in swing beds

Who Should Attend

Chief executive officers, chief operating officers, chief financial officers, board members, chief medical officers, chief nursing officers, accreditation and regulation directors, nurse managers, pharmacists, quality managers, risk managers, healthcare attorneys, compliance officer, health information management personnel, social workers, discharge planners, infection preventionist, policy and procedure committee members, dietitians, patient safety officer, radiology director, emergency department directors, outpatient director, medication team, ethicist, director of Rehab, operating room supervisor/staff, and any other person with direct patient care who is responsible to make sure there is compliance with the CAH CoPs.

Faculty

Sue Dill Calloway, RN, AD, BA, BSN, MSN, JD, CPHRM, CCMSCP Attorney at Law is currently the Medical-Legal Consultant and President of Patient Safety and Healthcare Consulting and Education. She is also the past chief learning officer and a current board member for the Emergency Medicine Patient Safety Foundation.

She has been employed in the nursing profession for more than 30 years. Ms. Calloway has legal experience in medical malpractice defense for physicians, nurses and other health professionals.

Ms. Calloway received her AD in nursing from Central Ohio Technical College. Her BA, BSN, MSN (summa cum laude) and JD (with honors) degrees are from Capital University in Columbus. She is a member of many professional organizations. She has authored over 102 books and has published many articles. She is a frequent lecturer on healthcare issues.

Services for Physically Challenged Individuals

We wish to take reasonable steps to ensure no individual who is physically challenged is discriminated against because of the absence of auxiliary aids and services. If special arrangements or diet are required for an individual to participate in this program, please contact us at (502)426-6220.

Registration

The registration fee for this program is \$290 for KHA members and \$450 for non-members. This fee covers all handout materials, beverage breaks, lunch and administrative costs. You may register by mail, fax or online.

Fax to: (502)426-6226

Mail to: KHREF

P. O. Box 436629

Louisville, KY 40253-6629

Online: http://www.kyha.com/CM/Events/Evts_List.aspx

Seminar Location/Hotel Accommodations

Hilton Garden Inn Northeast

9850 Park Plaza Avenue

Louisville, Kentucky 40241

502-423-0018

Rates: \$124/single

Cutoff date: February 7, 2017

To reach the Hilton Garden, take I-265 (Gene Snyder) to exit 34. Go west on Kentucky 22, approximately 1/2 mile. Turn right on Springdale Drive. Turn right on Park Plaza Avenue. The Hilton Garden is right behind "The Paddock" shopping complex.

Continuing Education Credit

This program is approved by the Kentucky Board of Nursing for 12.3 contact hours, program offering number 5-0023-1-18-175 expiration date December 31, 2017. The Kentucky Board of Nursing approval of individual nursing education provider does not constitute endorsement of program content. Participants must attend the entire session and complete the evaluation. Those desiring continuing education credit must have nursing license number or social security number at registration.

The Kentucky Hospital Association is authorized to award 11 hours of ACHE Qualified Education Credit for this program. Participants wishing to have the continuing education hours applied toward credit should list their attendance for advancement or recertification in ACHE.

Cancellations

A refund of registration fees will be made to those registrants notifying KHREF of cancellation five (5) working days prior to program date. A \$40 processing fee will be assessed against each refund. No refunds will be made after that date. Substitutions are accepted.

Agenda/Schedule

Schedule - March 2

1:00pm – 1:30pm
Registration

1:30pm-4:30pm
CMS CAH Conditions of Participation for CAH - Part 1

Schedule - March 3

8:00am-8:30am
Registration/Continental Breakfast

8:30am-12:00pm
CMS CAH Conditions of Participation for CAH - Part 2

12:00pm-12:45pm

12:45pm-4:30pm
CMS Conditions of Participation for CAH - Part 3

4:30pm
Adjournment

PART 1

Introduction

- History
- Changes for 2015
- Proposed changes for 2017
- Most changes since inception of CAH program
- CMS memos
- Insulin pen, safe injection practices, deficiencies, reporting to PI, final three worksheets, luer misconnections, revised complaint manual, humidity in the OR, OPO contracts, equipment maintenance, etc.
- CAH problematic standards
- CAH Resources

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PART 2

Regulations and Interpretive Guidelines for CAHs

- Direct Services
- Services Provided through Agreements or Arrangements
- Nursing Services
- Drug and biologicals
 - Security of medication, qualifications of pharmacy director, proper environmental conditions, P&P to monitor all carts, compounding, blue box advisories, Drug Quality and Security Act, standards of care, dispensing medications, list of high alert medications, labeling, definition of medication error, adverse event, indicator or trigger drugs

Pharmacy rewritten in 2015

- Inspections/staff interviews
- Dispensing of drugs
- Pharmacist responsibilities
- Staffing in pharmacy
- Pharmacy policies and procedures
- Medication therapy monitoring
- Pharmacy USP 797 regulations
- Emergency medicine kits
- Drug storage
- Nursing med carts/anesthesia carts
- Outdated drugs
- Survey of pharmacy
- Reporting ADR and medication errors
- Near misses/good catches
- High alert medication
- Definition of medication error required
- Trigger/indicator drugs
- Monitoring medication errors
- Medication alerts
- Standard of care for medications
- Websites and additional resources
- Required pharmacy P&P
- Do not use abbreviations
- Sound alike/look alike drugs
- Non-punitive policies

Infection control rewritten in 2015 and 2017 proposed changes

- Antibiotic stewardship program requirements
- PI must be prequalified
- Investigating and controlling infections
- Following national recognized standards and guidelines
- Healthcare associated infections
- Four challenges in infection control; MDRO, ambulatory care, communicable diseases and bioterrorism
- Infection control websites
- Infection control orientation new employees
- Surveillance, sanitary environment, and mitigation of risks
- Role of leaders in infection control
- Infection control officer

- Conditions of participation
- How to find manual, survey memos, and changes
- CMS websites
- Copies of documents by surveyor
- How to locate changes
- Rehab or Psych distinct unit standards
- CMS Survey and Certification website
- Visitation
- Telemedicine standards

Survey Protocol

- Introduction
- Tasks in the Survey Protocol
- Survey Team

Regulations and Interpretive Guidelines for CAHs

- Swing bed module
- Compliance with Federal, State and Local Laws and Regulations
- Licensure of CAH
- Licensure, Certification or Registration of Personnel
- Status and Location
- Location Relative to Other Facilities or Necessary Provider Certification
- Compliance with CAH Requirements at the Time of Application Agreements
- Agreements with Network Hospitals
- Agreements for Credentialing and Quality Assurance
- Emergency Services, respiratory policies
- ED staffing
- EMTALA
- Equipment, Supplies, and Medication
- Blood and Blood Products
- Staffing/Personnel
- Coordination with Emergency Response Systems
- Number of Beds and Length of Stay
- Observation, two midnight rule
- Physical Plant and Environment
- Disposal of trash
- Storage of drugs
- Construction and equipment
- Maintenance
- Emergency Procedures
- Life Safety from Fire
- Emergency fuel and water
- Emergency preparedness plan
- LSC waivers
- Fire inspections
- Board section
- Staffing
- Physician responsibilities
- Physician supervision
- Transfer of patient
- Patient admissions
- Patient care policies
- Medical management
- Discrimination and section 1557 requirements

Safe Medication

- Preparation and administration
- 10 CDC Safe Injection Practices
- CMS IC worksheet and safe injections
- Single and multi-dose vials
- Fingerstick devices, scopes, glucometers, insulin pens

Dietary and Nutrition Services rewritten in 2015 and 2017 proposed changes

- Dietary policies
- C&P to order diet
- Meeting patient needs, diet order, follow recognized dietary practices
- Dietary compliance
- Qualified dietician
- Dietary support staff
- Assessment of patients and order

Outpatient Services and 2017 proposed changes

- Outpatient department
- Outpatient director
- Many changes in 2014 and 2015
- Board and MS action

Rehab section added 2015

Lab

- Lab services

Radiology

- Many changes
- Radiology services
- Radiology staff
- Scope of radiology services
- Radiology policies required

Contracted Services

Emergency procedures

Nursing rewritten in 2015 and 2017 proposed changes

- Nursing care
- Observation of med passes/nursing care
- Changes in observation guidelines
- Nursing care plans
- RN for each patient
- RN supervising care
- Drugs and IVs
- Timing of medications
- High alert drugs
- Safe opioid use
- Sedation scales
- Blood and blood products
- Verbal orders
- Verbal order policy
- Culture of questioning
- Medication passes
- Nursing care plan

Visitation

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PART 3

Medical Records and 2016 and 2017 changes

- Medical record standards
- Identification of author
- Access to medical records
- Inpatient and outpatient requirements for medical records
- Records System
- Informed consent
- List of procedures required for consent
- Medical necessity and the RACs (recovery audit contractors)
- History and physicals
- Discharge summaries
- Preventing unnecessary readmissions
- Response to treatment
- Confidentiality of medical records
- Retention of medical records
- Protection of Record Information

Surgical Services

- Surgery policies required
- PACU
- OR register
- Operative report
- Surveyor in the OR

- Surgical privileges
- Designation of Qualified Practitioners

Anesthesia services

- Anesthetic Risk and Evaluation
- Administration of Anesthesia
- Pre-anesthesia evaluation
- Post-anesthesia evaluation
- Discharge
- PI required
- Healthcare-associated infections
- State Exemption of CRNAs
- Periodic Evaluation

Organ, Tissue and Eye Procurement

- Definition of imminent death
- Tissue and eye bank
- Family notification
- Organ donation

Special Requirements for CAH Providers of Long-Term Care Services (Swing beds)

- Eligibility
- Payment
- SNF Services
- Resident Rights
- Exercise of Rights

- Notice of Rights and Services
- Free Choice
- Privacy and Confidentiality
- Work
- Mail
- Access and Visitation Rights
- Personal Property
- Married Couples
- Admission, Transfer and Discharge Rights
- Transfer and Discharge
- Payment of care
- Content of notice
- Resident Behavior and Facility Practices
- Restraints, Abuse
- Staff Treatment of Residents
- Hiring of employees
- Activities
- Social Services
- Resident Assessment
- Comprehensive Care Plans
- Discharge Summary
- Nutrition
- Provision of Services
- Websites for CAH
- CAH resources

Registration Form - Mail form by February 20, 2017

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March 2-3, 2017
Hilton Garden Inn Northeast
Louisville, Kentucky

Online Registration: http://www.kyha.com/CM/Events/Evts_List.aspx

Please Complete Information:

Name _____

Title _____

email _____

Name _____

Title _____

email _____

Complete Hospital Information:

Hospital _____

Address _____

Phone _____

Number of vegetarian meals required

Registration Fee:

The fee for this program is: \$290 per participant (KHA member)
\$450 per participant (non-member)

Number of participants _____ x fee = _____
(amount enclosed)

Check Enclosed (Make checks payable to KHREF)

Charge my Mastercard/VISA/American Express

Person to call for card number:

Phone #: _____

Name on Card _____
(Print Name)

Cardholder Signature: _____

Checks and/or registration forms need to be mailed by **February 20** to:

KHREF
PO Box 436629
Louisville, Kentucky 40253-6629

Phone: (502) 426-6220
Fax: (502) 426-6226



KHREF

Kentucky Hospital Research and
Education Foundation, Inc.