

# The 2017 CMS Hospital Conditions of Participation: *A Clear-Eyed Approach to Ensure Compliance*

March 1-2, 2017 • Hilton Garden Inn Northeast • Louisville, Kentucky

## Overview

If a CMS surveyor showed up at your hospital tomorrow would you know what to do? **Come join us as we cover a record breaking year of changes in the CMS Hospital Conditions of Participation (CoPs)!!** This is a must attend program for anyone with direct patient care in the hospital. Are you in compliance with all 525 pages of the CMS hospital manual? This program will cover the entire manual.

There has been an increased surveillance activity of hospitals by CMS. The CMS list of hospital deficiencies will be discussed along with the final CMS hospital worksheets. The manual is being updated more frequently now. A manual issued July 10, 2015 rewrote all the radiology and nuclear medicine sections. The November 20, 2015 manual implemented ten tag number changes in pharmacy and revised tag 405 in nursing. There are also proposed changes to the discharge planning standards which are significant and will be implemented in 2017. The hospital will need to get the discharge summary in the hands of the primary care physician within 48 hours. There are five new quality measures, five new things to add to the assessment form, medication reconciliation, providing written information on side effects of medication, five things that will have to be in the discharge instructions and more

The Hospital Improvement Act will also make many changes in 2017. This proposed rule will require all hospitals to have an antibiotic stewardship program. It will make many changes to infection control. Changes will also be made to nursing, medical records and QAPI. Changes were made in emergency preparedness which will be discussed and interpretive rules issues in 2017.

In the recent past, there were changes to many sections including the QAPI standards and worksheet and guidelines on medication administration, safe opioid use, IV medication and blood transfusions. There were recently more than a dozen changes to medical staff, dietary, safe injection practices, outpatient orders, and more. CMS also issued a memo on infection control breaches that will result in notification of the state's epidemiologist. There have been changes in the guidelines for self-administered medications, standing orders, restraints, plan of care and lots more!

Every hospital that accepts payment for Medicare and Medicaid patients must comply with the Centers for Medicare & Medicaid Services Conditions of Participation (CoPs). The CMS manual has interpretive guidelines that

must be followed for all patients treated in the hospital or hospital-owned departments. Facilities accredited by the Joint Commission, Healthcare Facility Accreditation Program, CIHQ, and DNV Healthcare also must follow these regulations. The interpretive guidelines serve as the basis for determining hospital compliance.

There were a number of important **memos** issued including glucose monitoring, CRE and ERCPs, privacy and confidentiality, infection control breaches, equipment maintenance, IV and Blood, OPO contracts, outpatient orders, insulin pens, discharge planning, hospital deficiencies, Luer misconnections, complaint manual, list of hospital deficiencies, complaint manual revisions, reporting adverse events to the PI program, humidity in the OR and safe injection practices. There were a record-breaking number of changes in the recent past including changes on visitation, standing orders, soft wrist restraints, self-administered medication, telemedicine, advance directives, plan of care, informed consent, timing of medication, anesthesia, respiratory and rehabilitation orders, IV medication and blood products, and an important pharmacy standard.

This program will also cover the final CMS three worksheets on infection control, discharge planning and QAPI. These three worksheets are very important for hospitals to be aware of.

This program will discuss both changes and hot issues including regulations on preprinted orders, standing protocols, history and physicals, verbal orders, medication security, post-anesthesia evaluations, discharge appeal rights, patient rights, grievance, outpatient issues and restraints and seclusion. Many regulations address pharmacy and medication management safety issues. Infection control is also very important and CMS received a \$50 million dollar grant to enforce these and HHS a billion dollars which has resulted in increased scrutiny of the infection control standards and more knowledgeable surveyors.

There also are sections on medical record services, dietary, utilization review, emergency department, surgical services, anesthesia, PACU, medical staff, nursing services, outpatient department, rehabilitation, radiology, respiratory, physical environment, infection control, organ and tissue, patient rights and discharge planning. Hospitals should perform a gap analysis to ensure they are compliant with all these interpretive guidelines and assign one person to be responsible for ensuring compliance.



**KHREF**

Kentucky Hospital Research and  
Education Foundation, Inc.

## Objectives

At the conclusion of the program, participants will be able to:

- Recall that all hospitals that accept Medicare and Medicaid have to be in compliance with all of the hospital conditions of participation and for all patients
- Discuss that CMS has issued the final worksheets on QAPI, infection control, and discharge planning
- Discuss that CMS has completely rewritten the discharge planning standards
- Describe that CMS has patient rights standards, which are the most problematic standards in the hospital CoP manual
- Recall that there are many educational requirements for restraint and seclusion
- Discuss that medical records section has the requirements for verbal orders which have been problematic for hospitals
- Discuss the importance of making sure all protocols are approved by the Medical Executive Committee (MEC) and that an order is entered in the chart
- Discuss that CMS has sections in the hospital CoP manual of informed consent, advance directives and contact management

## Who Should Attend

Chief executive officers, chief operating officers, chief medical officers, chief nursing officers, nurses, quality managers, consumer advocates, risk managers, legal counsel, compliance officers, health information management, case managers, social workers, discharge planners, pharmacists, PI coordinator, Joint Commission coordinator, rehab director, dietitians, infection preventionist, medication management team, anesthesia and surgery staff, PACU director, respiratory therapy director, director of radiology, and anyone who is a direct patient care giver or is responsible to ensure compliance with the CMS CoPs.

**Please note that there is a separate CoP for critical access hospitals and a separate program covering the CAH CoP is scheduled for March 2-3.**

## 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.

## Continuing Education Credit

This program is approved by the Kentucky Board of Nursing for 12.9 contact hours, program offering number 5-0023-1-18-174 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 ACE Qualified Education Credits for this program. Participants wishing to have the continuing education hours applied toward credit should list their attendance for advancement or recertification in ACE.

## 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:** <https://secure.kyha.com/meetingregistration.asp>

## 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.

## 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 - March 1

8:00am-8:30am

Registration/Continental Breakfast

8:30am-12:00pm

CMS Conditions of Participation for PPS Hospitals

12:00pm-12:45pm - Lunch (provided)

12:45pm-4:30pm

CMS Conditions of Participation for PPS Hospitals (continued)

## Schedule - March 2

7:30am-8:00am

Continental Breakfast

8:00am-11:30am

CMS Conditions of Participation for PPS Hospitals (continued)

11:30am - Adjournment

The agenda will cover:

### 1. Overview of the CMS' Survey Process

- Mandatory compliance with CoPs and governing body

### 2. Patient Rights

- Interpreters, advance directives, restraints, abuse and neglect, criminal background checks,

confidentiality of patient records and grievances

### 3. Quality Assessment and Performance Improvement

### 4. Medical Staff

### 5. Nursing Services

- Director of nursing, staffing policies and procedures, nursing care plan, staff competency, preparation and administration of drugs

### 6. Medical Records

- Organization and staffing, confidentiality of records, content of records, legibility requirements, authentication, informed consent, new H&P and verbal orders

### 7. Pharmaceutical Services

- Storage of drugs, pharmacy administration, floor stock, patient safety, drugs and biological and high-risk patients

### 8. Utilization Review

- Composition of UR committee, admission or continuous stays and new Medicare patient discharge appeal rights and 2015 changes

### 9. Infection Control

### 10. Discharge Planning

- Identification of patient needs, discharge planning and evaluation

### 11. Organ, Tissue and Eye Procurement

### 12. Surgical & Anesthesia Services

### 13. Radiological Services

- Radiation exposure, adverse reaction to agents and secure area for films  
*Completely rewritten in 2015*

### 14. Laboratory Services

- Emergency lab services, tissue specimen requirements, infections, blood, and blood products

### 15. Food and Dietary Services

- Diets and menus, patients' nutritional needs

### 16. Nuclear Medicine Services

### 17. Emergency Services

### 18. Rehabilitation Services

### 19. Respiratory Services

### 20. Additional Manuals

- EMTALA, long-term care, life safety code, ambulatory surgical services, laboratories, guidelines for determining immediate jeopardy and home health

## Registration Form - Mail form by February 20, 2017

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Online Registration: [http://www.kyha.com/CM/Events/Evts\\_List.aspx](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, 2017** to:

**KHREF, PO Box 436629, Louisville, KY 40253-6629**  
**Phone: (502) 426-6220 Fax: (502) 426-6226**