CMS Conditions of Participation for PPS Hospitals

December 1-2, 2014 ● Hilton Garden Inn Northeast ● Louisville, Kentucky

Overview

There has been increased surveillance activities of hospitals by CMS and the CMS list of hospital deficiencies will be discussed along with the revised CMS hospital worksheets. There have been four updates to the manual issued already in 2014. These include rewriting of the QAPI standards and lengthy new guidelines on medication administration, safe opioid use, IV medication and blood transfusions. On July 11, 2014 there were a dozen changes to medical staff, dietary, outpatient orders, radiology and more. CMS also issued a recent memo on infection control breaches that will result in notification of the state’s epidemiologist.

There are new interpretive guidelines for self-administered medications, standing orders, restraints, plan of care and lots more! The discharge planning standards have been completely rewritten and over 13 new CMS survey memos have been issued recently, which will be discussed.

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, AOA, 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 recent memos issued including privacy and confidentiality, infection control breaches, equipment maintenance, IV and Blood, OPO contracts, outpatient orders, insulin pens, discharge planning, hospital deficiencies, Luer misconnections, revised 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 revision to the CMS three worksheets on infection control, discharge planning and PI.

This program will discuss both recent changes and hot issues including regulations on preprinted orders, standing protocols, use of a stamp, 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 for enforcement, which has resulted in increased scrutiny of the infection control standards. CMS has recently announced it will make unannounced visits to assess infection control standards.

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.

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 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
- Recall that CMS has three revised worksheets on infection control, PI, and discharge planning

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 December 2-3.
Faculty
Sue Dill Calloway MSN, JD, RN, CPHRM, CCMSCP, is a nurse attorney and consultant with over 30 years experience. Currently, she is president of Patient Safety and Health Care Education and Consulting and previously served as the chief learning officer for the Emergency Medicine Patient Safety Foundation. Prior to her current role, Sue was the director of hospital patient safety for The Doctors’ Company and OHIC Insurance Company. She has conducted many educational programs for nurses, physicians and other health care providers and has authored numerous books and articles. She is a frequent speaker and well known across the country in the area of health care law, risk management and patient safety.

Handouts
In order to suit attendees’ different learning styles, we will be emailing handouts in multiple formats in advance of the program so attendees can print their handouts as they like; or avoid printing them all together and view them on their laptop or tablet computer. Please be sure to provide an individual email address for each attendee so they receive the handouts

Continuing Education Credit
This program is approved by the Kentucky Board of Nursing for 11.6 contact hours, program offering number 5-0023-1-18-081 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 Credits for this program. Participants wishing to have the continuing education hours applied toward credit should list their attendance for advancement or recertification in ACHE.

Registration
The registration fee for this program is $250 for KHA members and $400 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: KHERF
P.O. Box 436629
Louisville, KY 40253-6629
Online: https://secure.kyha.com/meetingregistration.asp

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.

Cancellations
A refund of registration fees will be made to those registrants notifying KHERF of cancellation five (5) working days prior to program date. A $25 processing fee will be assessed against each refund. No refunds will be made after that date. Substitutions are accepted.

Agenda

Schedule - December 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 - December 2
7:30am-8:00am  
Continental Breakfast

8:00am-11:00am  
CMS Conditions of Participation for PPS Hospitals (continued)

11:00am - Adjournment

The agenda will cover:

Overview of the CMS’ Survey Process
- Introduction
- Location of the manual
- CMS memos
- Getting up with new changes
- Hospital worksheets
- Recent changes and 2014 changes
- Changes in the past 24 months
- CMS required education
- What’s really important

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### Medical Records (Health Information Management)
- Organization and staffing
- Confidentiality of records
- Content of records
- Legibility requirements
- Authentication
- Informed consent
- H&P
- Verbal orders
- Signature stamps
- Discharge summary

### Pharmaceutical Services
- Storage of drugs
- Pharmacy administration
- Floor stock
- Patient safety
- Drugs and biological
- High-risk medication
- Definitions of medication errors, ADE and DI
- Notification of physician
- Policies required
- Storage and security of medications
- Self administration of medication

### Radiological Services
- Radiation exposure
- Adverse reaction to agents
- Secure area for films
- Safety precautions
- Shielding of patients
- Order required
- Supervision of staff
- Signing of radiology reports

### Laboratory Services
- Lab services
- Tissue specimens
- Blood bank
- Look back program
- Fully funded plan

### Food and Dietary Services
- Diets and menus
- Dietician can order diet if C&P
- Patient nutritional needs
- Diet manual and therapeutic menus
- Qualified director required
- Dietary policies required
- Nutritional assessment
- Order required
- Therapeutic diets and nutritional needs
- Proposed dietary standards privileges for diet

### Utilization Review
- Composition of UR committee
- Admission or continuous stays
- Medicare patient discharge appeal rights
- UR plan
- Scope of reviews

### Physical Environment
- Buildings and equipment
- Compliance with PI
- Life safety code
- Emergency preparedness
- Emergency power and lighting
- Emergency gas and water
- Ventilation, light, temperature

### Infection Control
- Infection preventionist
- IP responsibilities
- Policies and procedures required
- Mitigation of risks
- Safe injection practices
- Immediate use
- Medical equipment and supplies
- Log of incidents
- Mandatory training

### Discharge Planning
- Identification of patient needs
- Discharge planning and evaluation
- Discharge planning responsibility
- Identification of patients
- Transfers
- Referrals
- Timely discharge evaluation
- Discharge plan and self care evaluation
- DP Worksheet

### Organ, Tissue and Eye Procurement
- Policy requirements
- Board required
- Organ donation training
- Family notification
- OPO Notification one call rule

### Surgical & Anesthesia Services
- Follow standards of care
- Policies required
- Supervision requirement
- Preventing OR fires
- H&P
- Consent
- OR register
- Operative report
- Required equipment
- PACU and 2014 changes
- Anesthesia policies required
- Anesthesia and analgesia standards
- Pre and post-anesthesia requirements
- Anesthesia staffing
- Documentation required
- Intra-operative anesthesia record

### Outpatient Services

### Rehabilitation Services

### Respiratory Services
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CMS Conditions of Participation (CoP) for PPS Hospitals
December 1-2, 2014
Hilton Garden Inn Northeast
Louisville, Kentucky

☐ Number of vegetarian meals required

Registration Fee:
The fee for this program is: $250 per participant (KHA member)
$400 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 November 24, 2014 to:

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

K H R E F
Kentucky Hospital Research and Education Foundation, Inc.