Webinar: Critical Access Hospitals – CoPs: Part 1

August 6, 2015  10 – 12:00 p.m. ET

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 the many new 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 three part webinar.

Did you know that about a third of the CMS critical access manual has been rewritten? CMS issued an advanced 93 page memo on January 30, 2015 which discussed these changes. CMS issued a final manual on April 7, 2015 implementing all of these significant and numerous changes. This three part program will include information on the entire 270 page manual.

Webinar Objectives

- Describe that CMS requires the board to enter into a written agreement for 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

Target Audience

CEOs, COOs, CFOs, nurse executives, accreditation and regulation director, nurse managers, pharmacists, quality managers, risk managers, healthcare attorneys, health information management personnel, social workers, dieticians, health information management, nurses, nurse educators, nursing supervisors, patient safety officer, infection preventionist, radiology director, emergency department directors, outpatient director, medication team, ethicist, director of Rehab (OT, PT, speech pathology, and audiology), OR supervisor, OR staff, CRNA, anesthesia providers, dietician, radiation staff, director of health information management, infection preventionist, dietician, activities director of swing bed patients, infection control committee members, pharmacists, and compliance officers

Webinar Outline

Introduction

- History
- Changes for 2015
- January 16, 2015 93 page memo of changes and April 7, 2015 manual
- Most changes since inception of CAH program
- CMS memos
- CAH problematic standards
- CAH Resources
- 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
- Number of Beds
- Length of Stay
- Physical Plant and Environment
- Disposal of trash
- Storage of drugs
- Physical environment
- 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

About the Speaker
Sue Dill Calloway, R.N., M.S.N, J.D. is a nurse attorney and President of Patient Safety and Healthcare Consulting and Education. She was the past VP of Legal Services at a community hospital in addition to being the Privacy Officer and the Compliance Officer. She worked for over 8 years as the Director of Risk Management and Health Policy for the Ohio Hospital Association. She was also the immediate past director of hospital patient safety and risk management for The Doctors Insurance Company in Columbus area for five years. She does frequent lectures on legal and risk management issues and writes numerous publications.

Ms. Calloway has given many presentations locally and nationally to nurses, physicians and attorneys on medical and legal issues. She has authored numerous articles and over 1000 articles and 100 books, including the 2009 Joint Commission Leadership Standard (HCPro), Nursing and the Law (PESI, 1986 and 1987), Ohio Nursing Law (West Publishing), Nursing Ethics and the Law (PESI, 1986), Legal Issues in Supervising Nurses (PESI, 1988), Medicine Made Easy (PESI, 1992) and The Law for Nurses Who Supervise/Manage Others (PESI, 1993), Legal Issues in Obstetrics (PESI, 1997) and JC Leadership Standards (HCPro, 2004), and the Compliance Guide to the CMS and the Joint Commission Patient Rights Standards (HCPro, 2005), and the 2009 book on the Joint Commission Leadership Standards (HCPro). She often writes articles called the “CMS Corner” in Briefings on the Joint Commission. Ms Calloway is a 1996 recipient of PESI's Excellence in Education Award.

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