



Critical Access Hospital (CAH) Conditions of Participation: Ensuring Compliance

Laura A. Dixon, BS, JD, RN, CPHRM
303-955-8104

CAHs must comply with the Centers for Medicare & Medicaid Services' Conditions of Participation manual for Critical Access Hospitals – Appendix W. This four-part webinar will cover the entire CAH CoP manual. 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 revised changes.

There were over seven hundred pages of new regulations for CAHs for 2020, including a change to all the tag numbers with a new CAH manual. Most of the new Tag numbers do not include Interpretive Guidelines or Survey Procedures. Other changes included twenty-five new tag numbers in infection prevention and control and antibiotic stewardship and ten new tag numbers in QAPI. The changes added the revised emergency preparedness requirements. As for Swing Bed changes – the regulations are limited to Appendix W, but the interpretive guidelines and survey procedures are in Appendix PP.

This seminar will help CAHs comply with specific CoP problem areas, including nursing care plans, necessary policies and procedures, medication carts and drug storage, informed consent, verbal orders, medication administration, protocols, standing orders and emergency preparedness. There are many pharmacy standards and medication-related sections that overlap, which will be covered in detail.

Part Three of Four: Infection Prevention, Safe Medication, Lab, Provision of Services: Outpatient, Laboratory, Nursing; and Discharge Planning

Objectives

- Recall that the infection preventionist must be appointed by the board
- Discuss that insulin pens can only be used on one patient
- Describe that an order is needed to allow the patient to self-administer medications
- Explain that there are three-time frames in which to administer medications
- Discuss that CMS requires that a plan of care be done



Agenda

1. Introduction

- a. How to find the manual
- b. Policy and Memo website
- c. Access to Deficiency data

2. Infection Prevention and Control

- a. CDC vaccine storage and handling
- b. Final changes to infection control and antibiotic stewardship requirements
- c. CDC Core elements
- d. Facility Wide program
- e. Infection control organizations and following national recognized standards and guidelines
- f. Infection Control worksheet
- g. Infection preventionist role and responsibilities
- h. Healthcare associated infections
- i. Infection control orientation new employees
- j. Surveillance, sanitary environment, and mitigation of risks
- k. Role of leaders in infection control
- l. Documentation
- m. Antibiotic Stewardship program
- n. ASP leadership duties and responsibilities
- o. CDC training and resources
- p. 10 CDC Safe Injection Practices

3. Provision of services

- a. Diagnostic and therapeutic services
- b. Supplies
- c. Outpatient services
- d. Outpatient director
- e. Inpatient services
- f. Census and Ensuring compliance

4. Lab Services

- a. Meet CLIA standards
- b. Scope of services

5. Nursing

- a. Nursing services and leadership
- b. Leadership duties
- c. Supervision and Evaluation of care
- d. Observation of med passes/nursing care
- e. Changes in observation guidelines
- f. Nursing care plans



- g. Drugs and IVs
- h. Written policies and procedures for administration
- i. Timing of medications
- j. High alert drugs
- k. Safe opioid use and patient assessment
- l. Sedation scales
- m. IV medications
- n. Blood and blood products
- o. Verbal orders

6. Discharge Planning

- a. Need for effective discharge planning process
- b. Discharge evaluation and plan
- c. Review of discharge planning process
- d. Requirement to assist in PAC selection
- e. Discharge Planning worksheet

Target Audience

CEO's, COO's, Chief Nursing Officer, Chief Medical Officer, Quality Managers, Consumer Advocate, Nurse Educators, Department directors, All Nurses, Risk Managers, Compliance Officers, Joint Commission Liaison, Director of Health Information, Case Managers, Pharmacists, Social Workers, Discharge Planners, PI Coordinator, Patient Safety Officer, Patient Safety Committee, Nurse Managers, Outpatient Director, Director of Rehab, Dieticians, Infection Control, Medication Management Team, Anesthesia and Surgery staff, PACU Director, Policy and Procedures Committee, Respiratory Therapy Director, Director of Radiology, Infection Preventionist, Pharmacist, Pharmacy Director

Continuing Education:

The Kentucky Hospital Research and Education Foundation is an approved Kentucky Board of Nursing continuing education provider. This offering number 5-0023-12-23-0-26 is approved for 2.4 contact hours. Participants must attend the entire session, complete the post-session evaluation, and provide nursing license number in order to receive contact hours and be awarded a certificate. No partial credit will be given. The Kentucky Board of Nursing Approval does not constitute endorsement of program content.

Registration:

KHA is pleased to offer this webinar to all member hospitals at a single charge per facility rate. Register for your hospital and share the login information with your whole team to ensure your staff receives necessary continuing education!
Member Rate: \$225.00

Contact [Tammy Wells](#) for more information or assistance registering.