



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 Four of Four: Radiology, Rehab, Visitation, Medical Records, QAPI, Organ Procurement, Swing Beds

Objectives - At the conclusion of part three, participants should be able to:

- 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
- Recall that CMS patient rights are in Swing Beds section.

Agenda

1. Introduction

- a. How to find the manual
- b. Policy and Memo website



- c. Access to Deficiency data

2. Radiology

- a. Radiology services
- b. Radiology staff
- c. Scope of radiology services
- d. Radiology policies required

3. Rehab

- a. Order required
- b. Plan of care requirements

4. Visitation

- a. Policies and procedures required
- b. When reasonable visitation restrictions can occur
- c. Written notice to patient and document
- d. Role of support person
- e. When patient is incapacitated
- f. When there is more than one support person
- g. Staff education required

5. Medical Records

- a. Timely access to medical records
- b. OCR actions for failure to comply
- c. Patient rights – timely access, copy
- d. Medical record requirements
- e. Content of medical record
- f. Informed consent requirement
- g. Discharge summaries
- h. History and physicals
- i. Description of response to treatment
- j. Entries into the medical record and identification of author
- k. Confidentiality of the medical record
- l. Release of medical records
- m. Retention of records
- n. New standard – reasonable effort for notification

6. Quality Assurance Performance Improvement - QAPI

- a. New requirements for CAHs
- b. Changes to the QAPI program
- c. Requirements of a QAPI program
- d. QAPI standards
- e. Data collection and analysis
- f. Previous standards and guidelines



7. Organ, Tissue, and Eye Procurement

- a. Requirement for policies and procured
- b. Need agreement with OPO, and/or Eye and tissue bank
- c. Need for staff training
- d. Definition of imminent death
- e. Tissue and eye bank
- f. Family notification
- g. Organ donation

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

- a. Rewritten and four changes in 2020
- b. Requirements/Eligibility for Swing beds
- c. Payment
- d. SNF Services
- e. Resident Rights
- f. Exercise of Rights
- g. Notice of Rights and Services
- h. Free Choice
- i. Privacy and Confidentiality
- j. Mail
- k. Access and Visitation Rights
- l. Personal Property
- m. Married Couples
- n. Admission, Transfer and Discharge Rights
- o. Transfer and Discharge
- p. Resident Behavior and Facility Practices
- q. Restraints, Abuse
- r. Staff Treatment of Residents
- s. Hiring of employees
- t. Activities
- u. Dental requirements
- v. Resident Assessment
- w. Comprehensive Care Plans
- x. Discharge Summary
- y. Nutrition
- z. Specialized rehab services

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 5-0023-12-23-0-27 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.