



2023 The CMS Hospital Conditions of Participation (CoPs)

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

This five-part online seminar series will cover the entire CMS Hospital CoP manual – Appendix A. It is a fantastic way to educate everyone in your hospital on all the sections of the CMS hospital manual, especially ones that apply to their department. This program will discuss the most problematic standards and how the hospital can do a gap analysis to assist in compliance with the CoPs.

Every hospital that accepts payment for Medicare and Medicaid patients must comply with the Centers for Medicare & Medicaid Services Conditions of Participation. The manual has interpretive guidelines that must be followed for all patients treated in the hospital or hospital owned departments. Facilities with deemed status accredited by the Joint Commission (TJC), HFAP, CIHQ, and DNV Healthcare must follow these regulations.

Sections addressed include medical record services, dietary, utilization review, emergency department, surgical services, anesthesia, PACU, medical staff, nursing services, lab, outpatient department, rehabilitation, radiology, respiratory, physical environment, pharmacy, infection control, organ and tissue, patient rights, and discharge planning.

The interpretive guidelines serve as the basis for determining hospital compliance and though some changes from 2020 continue to have interpretive guidelines and survey procedures pending, hospitals are still expected to comply with the regulations. This program will include the 2020 changes, where the gaps continue – absence of interpretive guidelines and survey procedures, and any recent updates.

CMS developed worksheets for assessing compliance with the QAPI, discharge planning standards and infection control. Though no longer utilized by State and Federal surveyors, the worksheets are available as excellent self-assessment tools for hospitals. These three worksheets will be covered.

Part Three of Five: Nursing and Pharmacy

Objectives:

- Describe which medications must be given timely and within one of three blocks of time
- Recall that all order/protocols should be approved by the Medical Staff and an order entered into the medical record and signed off
- Recall that a nursing care plan must be in writing, started soon after admission and maintained in the medical record
- Discuss patient safety issues with compounding pharmacies



- Recall that the hospital must have a safe opioid policy approved by the MEC and staff must be educated on the policy

Agenda

1. Nursing Services

- Organized and 24-hour services
- Director of nursing/CNO
- Nurse at bedside
- Director of nursing (CNO)
- Staffing and patient safety
- Nursing care plan
- Agency nurses
- Medication administration and safe opioid use
- Safe injection practices and compounding
- Policies and procedures for medication administration
- Timing of medication administration
- Assessment and monitoring of patients
- High later medications
- Compounding of medications
- Need for physician order
- Standing and preprinted order sets
- Verbal orders
- IV medications and blood administration
- Staff training and competency
- Self-administration of medication
- Reporting medication errors and ADEs

2. Pharmaceutical Services

- Antibiotic stewardship program requirements
- Revised CDC Core Elements for ASP
- Use of compounding pharmacies
- Obtaining from compounding pharmacy v. manufacturer or registered outsourcing facility
- BUD, packaging, and labeling of medications
- Requirement to follow professional standards of care
- Preparing CSPs outside the pharmacy
- Storage of drugs
- Pharmaceuticals available off hours
- Floor stock
- P&P to minimize drug error
- High Alert medications
- Reporting of Medication events



- n. Alerts and recalls
- o. Pharmacy Director
- p. Staff qualifications
- q. Pharmacy records
- r. First dose review
- s. Compounding pharmacy
- t. Definitions of medication errors, ADE
- u. Notification of physician
- v. Policies required and training on policies
- w. Pharmacy requirements
- x. Storage and security of medications
- y. Outdated or mislabeled medications or unusable drugs
- z. Drug interactions and side effects
- aa. PI requirements for adverse drug events
- bb. Medication shortages
- cc. Policies required

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 5-0023-12-23-0-21 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.