Centers for Medicare & Medicaid Services (CMS) Conditions of Participation (CoPs) for Hospitals: 2018 Update Webinar Series

A 5-Part Series

Session I: CMS Survey Process, Board & CEO Requirements and Medical Records/HIM (T5011)  
February 6, 2018

Session II: Patient Rights (T5015)  
February 13, 2018

Session III: Updates & Changes: Nursing & Pharmacy (T5018)  
February 20, 2018

Session IV: Quality Assessment & Performance Improvement (T5020)  
February 27, 2018

Session V: Infection Control and 2018 Proposed Changes (T5024)  
March 6, 2018

All sessions are from 9:00 a.m. – 11:00 a.m. (CST)

Register for the entire series and receive a discount on registration!

Overview
This five-part webinar series will cover the entire Centers for Medicare and Medicaid Services (CMS) Hospital Conditions of Participation (CoPs) manual. This is a great way to educate employees in your hospital on the sections of the CMS hospital manual that apply to their departments. Every hospital that accepts Medicare or Medicaid must be in compliance with these regulations and interpretive guidelines.

Session Overviews

Session I: CMS Survey Process, Board & CEO Requirements and Medical Records/HIM (February 6, 2018)
This session will focus on the overview of the CMS survey process, Board and CEO requirements and Medical Records/Health Information Management guidelines.

Learning Objectives:
- Demonstrate how to locate the CMS CoP manual
- Identify the guidelines that require a patient undergoing elective surgery have a history and physical not more than 30 days old and updated the day of admission
- Discuss how physicians must include date and time when signing off on verbal orders

Session II: Patient Rights (February 13, 2018)
This webinar will focus on patient rights, including, but not limited to, privacy and safety, confidentiality, patient advocacy, interpreters, low health literacy, advance directives, medical records, and restraint and seclusion deficiencies.

Learning Objectives:
- Identify CMS restraint standards that hospitals must follow
- Discuss how hospitals are required to have grievance policies and procedures in place
- Identify a patient’s right to file a grievance
- Discuss how CMS requires interpreters for patients with limited English proficiency and how this should be documented in the patient’s medical record

Session III: Updates and Changes: Nursing and Pharmacy (February 20, 2018)
Session 3 will focus on guidelines updates and changes for nursing services and pharmaceutical services.
Learning Objectives:
• Explain how medications must be given in a timely manner and within 3 blocks of time
• List the protocols and orders for medical records
• Identify the required CMS pharmacy policies
• Explain the guidelines for a nursing care plan involving a written plan included in the medical records
• Discuss the CMS rules for a safe opioid policy approval and education process

Session IV: Quality Assessment & Performance Improvement (February 27, 2018)
Session 4 will focus on medical staff, board and CEO guidelines, as well as quality assessment and performance improvement requirements, radiological guidelines, laboratory food and dietary services, utilization review and physical environment standards.

Learning Objectives:
• Discuss the CMS problematic patient safety standards located in the QAPI section of the manual
• Describe the radiology policies that include staff qualifications
• Discuss hospital credentialing of a dietician regarding patient diet orders

Session V: Infection Control and 2018 Proposed Changes (March 6, 2018)
This session will concentrate on infection control and 2018 proposed changes, discharge planning, organ, tissues and eye procurement, surgical and anesthesia services, outpatient services and proposed changes and rehabilitation and respiratory services.

Learning Objectives:
• Discuss the many infection control policies
• Explain how patients that are referred to home health and long-term care facilities must be given a list of these available facilities and that this should be documented in the medical record
• Discuss how all staff must be trained with regard to hospital policy on organ donation
• Identify specific post anesthesia assessment requirements that have to be documented in the medical record
• Identify the finalized discharge planning worksheet

Target Audience
CEOs, CMOs, CNOs, Nurses, Physicians, Quality Improvement Staff, Risk Management Staff, Performance Improvement Coordinators, Pharmacy and Medication Management Staff, Compliance Officers, Legal Counsel, Ethics Committee Members, Consumer Advocates, Joint Commission Coordinators, Behavioral Health Staff, Psychiatric Staff and Case Managers

Faculty
Sue Dill Calloway, MSN, RN, JD has been a nurse attorney and consultant for more than 30 years. Currently, she is president of Patient Safety and Healthcare Education and Consulting and was previously the chief learning officer for the Emergency Medicine Patient Safety Foundation. She has conducted many educational programs for nurses, physicians and other health care providers. Sue has authored over 100 books and numerous articles. She is a frequent speaker and is well known across the country in the areas of health care law, risk management and patient safety.

Certificates of Attendance
Certificates of Attendance will be issued to all registrants. These certificates should be placed on file at your hospital as evidence of attendance. Certificates of Attendance will not be awarded for recorded sessions.

Registration
$175 per session for AHA Member Hospitals
$825 for all sessions for AHA Member Hospitals: a savings of $50
(You must register for all sessions at the same time to take advantage of savings)

Registration includes one internet connection and one telephone connection at one location, although there can be an unlimited number of participants from your organization in that one listening room.

Two days prior to the event, you will receive instructions and passwords for accessing the event, along with the slide presentation and other resource materials. It is the responsibility of the registrant to download and/or access presentation materials prior to the day of the event.

Participants should register at least five business days prior to the event to ensure optimal processing of conference materials. To register, please submit the attached registration form. If you have not received an e-mail with
instructions (via the e-mail provided on the registration form) or if you are unable to download or open presentation materials, at least two business days prior to the event, please contact Anna Sroczynski at (501) 224-7878 or asroczynski@arkhospitals.org. Without payment (via check or credit card), your registration cannot be processed, and you will not receive connection instructions.

Cancellation Policy
Refunds, minus a $25 processing fee, will be granted if requests are received in writing by the AHA at least 5 business days prior to the program. No refunds will be issued after that date. Substitutions, however, are permitted. Fax cancellation/refund requests to the Education Department at (501) 224-0519.

REGISTRATION FORM
Centers for Medicare & Medicaid Services (CMS)
Conditions of Participation (CoPs) for Hospitals:
2018 Update Webinar Series
A 5-Part Series

A $50 Savings!
☐ Complete Five-Part Series – One Connection

Individual Sessions – Per Connection:
☐ Session 1: CMS Survey Process, Board & CEO Requirements and Medical Records/HIM - February 6, 2018
☐ Session 2: Patient Rights - February 13, 2018
☐ Session 3: Updates & Changes: Nursing & Pharmacy - February 20, 2018
☐ Session 4: Quality Assessment & Performance Improvement - February 27, 2018
☐ Session 5: Infection Control and 2018 Proposed Changes - March 6, 2018

Registration Fee
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Registration fee covers one or multiple participants at one location (one connection per registration) and includes one set of instructional materials/handouts. Upon receipt, additional handouts can be copied.

Name and Title of Contact Person ____________________________________________________________
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Check in the amount of $_________ payable to the Arkansas Hospital Association is enclosed.

Credit Card # _______________________________ ☐ Visa ☐ MasterCard (AmEx and Discover Not Accepted)

Cardholder’s Billing Address (including zip code) __________________________________________________

Expiration Date ________ CVV __________ Name on Card ________________________________________

Mail form and payment to
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phone: (501) 224-7878; or fax form with credit card information to (501) 224-0519.