

Details

Wednesday, Dec. 4, 2019
9:00—11:00 am CST

[Register Online](#)

SDAHO Member: \$125
Non-member: \$300

Questions?

[Michella Sybesma](#)

605-789-7528



*Prior registration is required.
Registration deadline is December 2, 2019. No-shows will be billed.
Substitutions welcome anytime via email. A full refund will be given to all cancellations received 10 or more business days prior to the program. No refunds will be given to cancellations received five or fewer business days prior to the program. All cancellation and substitution requests must be emailed to sheena.thomas@sdaho.org.

Overview:

CMS has finalized some significant changes to the hospital conditions of participation (CoPs) that every hospital and critical access hospital (CAH) should know.

These changes include the sections on nursing, medical records, infection control, quality assurance and performance improvement (QAPI), patient rights, history & physical (H&Ps), and restraint and seclusion. Most changes, with two exceptions, have an effective date of Nov. 29. The normal implementation date is 60 days, but CAHs will have 6 months to implement an antibiotic stewardship program and 18 months to implement a QAPI program since their QAPI requirements were completely rewritten.

All hospitals will be required to have an antibiotic stewardship program and include program details. Additionally, CMS clarified a number of existing requirements and a number of federal regulations that are already final, which makes this webinar an excellent resource.

Learning Objectives:

At the conclusion of this session, participants will be able to:

1. Identify hospital requirements of the CMS CoPs on antibiotic stewardship programs.
2. Discuss how CMS changed the term LIP (licensed independent practitioner) to LP (licensed practitioner) so PAs can order restraint and seclusion and do assessments if allowed by the hospital.
3. Describe how hospitals must have policies that describe which outpatient areas require a registered nurse (RN).
4. Explain why CMS removed the section that required hospitals to conduct autopsies in cases of unusual deaths.

Faculty:

Sue Dill Calloway, President, Patient Safety and Health Care Education and Consulting

Sue Dill Calloway has been a nurse attorney and consultant for more than 30 years. Currently, she is president of Patient Safety and Healthcare Education & Consulting. She was previously the chief learning officer for the Emergency Medicine Patient Safety Foundation.

The speaker has no real or perceived conflicts of interest that relate to this presentation.

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Registration information and fees

Fees are per connection at a facility and include electronic handout, and one connection line to the live webinar. Connection instructions and handout materials will be emailed to the contact person listed on the registration 1-2 days prior to the program.