



# September 2023 Webinars

To register online, visit [www.okoha.com/educationcalendar](http://www.okoha.com/educationcalendar).

## **Medical Staff Credentialing & Privileging, OPPE-FPPE (NC0906)**

**Sept. 6 – 1-2:30 p.m.**

**Target Audience: Medical staff credentialing, compliance**

**Speaker: Denise Smith, RN, MS, CLNC, HACP, Senior Consultant, Courtemanche**

An effective Medical Staff is critical to ensure safe patient care and positive health care outcomes. However, it is essential that these Providers are properly vetted through a sound credentialing and privileging process. Likewise, the evaluation of Provider performance is key to ensuring alignment with the standards set by the Medical Staff. This presentation will cover major areas of concern for these processes that are found by regulatory surveyors and recommendations for mitigating actions.

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## **Health Care Without Harmful Stigma: Intersections of Discrimination and Health Inequities (IA0907)**

**Sept. 7 – 9:30-10:30 a.m.**

**Target Audience: clinical leadership, health care educators, hospital administration, human resources**

**Speaker: Alison St. Germain, M.S., RD, LD, Registered Dietitian, St. Germain Nutrition Consulting, Ames**

Learn how to use weight-inclusive, trauma-informed care to guide patients into attaining sustainable well-being. This presentation will explore how weight bias lends to poor health outcomes, contributes to health inequities, and intersects with other biases including racism and sexism. What is your role in providing care that is inclusive, diverse, equitable, and accessible?

### *Learning Objectives*

- Define areas of harmful stigma often encountered in health care and education.
- Determine how bias contributes to poor health outcomes and health inequities.
- Identify what can be done now to provide inclusive, diverse, equitable, and accessible care.

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***Informed Consent Update: CMS, TJC, and DNV Standards (G3047)******Sept. 12 –9-11 a.m.*****Target Audience: CMO, CNO, compliance, ED, Joint Commission Coordinator, medical records, quality improvement, risk, legal****Speaker: Laura A. Dixon, BS, JD, RN, CPHRM, Risk Management and Safety expert**

This program will discuss the current Centers for Medicare & Medicaid Services (CMS) hospital Conditions of Participation (CoPs) on informed consent requirements. CMS notes that informed consent is a commonly cited deficiency.

CMS has three sections in the hospital CoPs manual regarding consent. All hospitals that receive Medicare and Medicaid reimbursement must comply with these regulations and interpretive guidelines. This program will discuss the variances between CMS requirements for hospitals and critical access hospitals.

The hospital must follow the consent regulations for all patients, not just those who receive Medicare and Medicaid assistance. Failure to follow these regulations could result in the hospital being cited and/or excluded from the Medicare program. Hospitals should ensure that their policies and procedures reflect the CMS requirements and that their staff are educated on the informed consent interpretive guidelines. CMS requires that hospitals ensure that physicians are following these guidelines. Consent is a process that must be implemented and adopted and is more than simply having a signed form.

***Learning Objectives***

- Recall that the CMS hospital CoPs regulations have three sections on informed consent.
- Describe the six minimum requirements that are now mandatory for any informed consent form for surgery that is completed at a Medicare-certified hospital.
- Discuss the CMS and accreditation organization standards applicable to your facility, which should be reflected in the hospital's policies and procedures.
- Understand that the medical staff must have a list of procedures and tests that will require an informed consent under federal regulations.

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***Infection Prevention & Antibiotic Stewardship (IA0912)******Sept. 12 –10 a.m.-noon*****Target Audience: CEO, CFO, COO, CMO, CNO, clinicians, infection prevention, quality, pharmacists****Speaker: Nancy Ruzicka, federal rules, regulations, and interpretative guidelines consultant**

This session will provide participants with information about the 2020 CMS conditions of participation for infection prevention and control and antibiotic stewardship. It will also review the related interpretative guidelines, which were published in July 2022. The use of the CMS infection control worksheet, 2022 interpretative guidelines, and commonly cited deficiencies will also be discussed.

***Learning Objectives***

- Describe the new CMS requirements for an antibiotic stewardship program.
- Describe the new CMS requirements for an infection prevention and control program.
- Identify examples of commonly cited infection control standards.

**Weekly Rounding for Safety and Quality (NC0913)****Sept. 13 – 1-2:30 p.m.****Target Audience: Nurses, physicians, C-Suite, safety, quality, risk, infection prevention****Speaker: Chris Pratt, MS, BSN, HACP, Senior Consultant, Courtemanche & Associates**

Evidence has demonstrated that frequent, purposeful rounding for safety and quality concerns supports safer patient care and staff morale. This webinar will provide recommendations for developing and implementing an effective rounding process that will support your organization's goal of zero harm.

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**Medical Record Chapter: Meeting the CMS Hospital CoPs and Access Requirements (G3049)****Sept. 19 –9-11 a.m.****Target Audience: CMO, CNO, compliance, ED, Joint Commission Coordinator, medical records, quality improvement, risk, legal****Speaker: Laura A. Dixon, BS, JD, RN, CPHRM, Risk Management and Safety expert**

This program will cover in detail the Centers for Medicare & Medicaid Services (CMS) regulations and interpretive guidelines for medical records for Acute Care and Critical Access hospitals. There will also be a brief discussion of the Interoperability and Patient Access Rules. The law effectively grants patients immediate access to health information in their electronic medical record without incurring a charge. Certain records are excluded, and the rule establishes exceptions to "information blocking". This rule and its implications for health care providers will be discussed.

This program will revisit information on HIPAA from the Office of Civil Rights, including the difference between patient access and when authorization is needed. There will also be a discussion on the standards that The Joint Commission changed to comply with the CMS Conditions of Participation (CoPs) requirements.

Other topics to be discussed include the CMS memo on texting, security of health information, history and physicals, and the Office of Inspector General (OIG) and CMS position on copy/paste in a medical record.

*Learning Objectives*

- Recall that CMS has specific informed consent requirements.
  - Describe when a history and physical must be done and what is required by CMS and the Joint Commission.
  - Explain both CMS and The Joint Commission's standards on verbal orders.
  - Recite that CMS has standards for preprinted orders, standing orders, and protocols.
  - Discuss when and by what circumstances health care providers can "block" patient/others' access to health information.
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**Medical Staff and Telemedicine: Meeting CMS CoPs and TJC Standards (G3051)****Sept. 26 –9-11 a.m.****Target Audience: CMO, CNO, compliance, ED, Joint Commission Coordinator, medical records, quality improvement, risk, legal****Speaker: Laura A. Dixon, BS, JD, RN, CPHRM, Risk Management and Safety expert**

Any hospital that accepts Medicare and Medicaid payments must comply with the regulations known as Conditions of Participation. The Centers for Medicare and Medicaid Services (CMS) hospital CoPs have sections on all aspects of patient care, including medical staff and telemedicine. There are multiple deficiencies from CMS related to the medical staff section. The board and medical staff sections of the CoPs will be discussed in detail. There will also be a concurrent discussion of the Joint Commission (TJC) standards for medical staff.

Although telemedicine has been a factor in health care for many years, COVID-19 gave it a larger role in the diagnosis and treatment of patients. Telemedicine continues to be a significant factor in health care today. Every acute care hospital, critical access hospital, and rural emergency hospital participating in telemedicine should ensure compliance. Standards for all three will be discussed.

A problematic standard regarding telemedicine is the failure of the hospital to have the required sections in the contract for telemedicine services. This webinar will cover what provisions should be included in a telemedicine contract.

#### *Learning Objectives*

- Recall that hospitals can have a separate medical staff or a unified shared integrated medical staff.
  - Describe the requirements for medical staff under CMS Conditions of Participation and TJC standards.
  - Discuss the requirement that hospitals must have a written telemedicine agreement that specifies the responsibilities of the distant-site hospital and entities to meet the required credentialing requirements.
  - Explain that the Joint Commission has standards on telemedicine.
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#### **Cancellation Policy**

*The registration fee, less a \$60 service charge, is refundable if notice is received before 4:00 p.m. five (5) business days prior to the program. No refunds will be issued for cancellations received after 4:00 p.m. five business days prior to the program. The cancellation/refund policy applies to registrations that indicate payment is being mailed prior to the program. No refunds will be issued for those who do not comply with this policy and the full registration amount will be due and owed to OHA.*

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*Registrants unable to attend may designate an alternate. Report substitutions to Amanda Bowen at [abowen@okoha.com](mailto:abowen@okoha.com) or Mary Winters at [winters@okoha.com](mailto:winters@okoha.com) prior to the program. Transfers from one OHA educational program to another are not permitted.*

#### **Connecting to the Program**

After you register for the program(s), you will receive a confirmation notice from OHA. Login instructions for online programs/webinars will be emailed 1-2 days prior to the program. If the program is recorded, each registrant will receive a copy, when it is available.

**If you have not received a confirmation email 24 hours prior to the program, please email Amanda Bowen at [abowen@okoha.com](mailto:abowen@okoha.com) to confirm your registration has been received.**



# September 2023 Webinars Registration

Check the box next to the webinar title to register:

- Medical Staff Credentialing & Privileging, OPPE-FPPE (NC0906)** – Sept. 6
- Health Care Without Harmful Stigma: Intersections of Discrimination and Health Inequities (IA0907)** – Sept. 7
- Informed Consent Update: CMS, TJC, and DNV Standards (G3047)** – Sept. 12
- Infection Prevention & Antibiotic Stewardship (IA0912)** – Sept. 12
- Weekly Rounding for Safety and Quality (NC0913)** – Sept. 13
- Medical Record Chapter: Meeting the CMS Hospital CoPs and Access Requirements (G3049)**– Sept. 19
- Medical Staff and Telemedicine: Meeting CMS CoPs and TJC Standards (G3051)** – Sept. 26

**Registration fee:**            \$200 per webinar for OHA members                    \$400 per webinar for non-members  
*The registration fee is per hospital location. Multiple connections will be allowed.*

### Online Registration:

Visit [www.okoha.com/educationcalendar](http://www.okoha.com/educationcalendar) and select the meeting title.

First-time online registrants who do not have a user ID and password may email [mia@okoha.com](mailto:mia@okoha.com).

Our website is optimized for use with Google Chrome.

### Fax or Email Registration:

Complete the form below and return to OHA by fax at (405) 424-4507 or email [abowen@okoha.com](mailto:abowen@okoha.com).

*Please register one contact person who will forward access information to other participants.*

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Title of Contact Person \_\_\_\_\_

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

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