

CMS Hospital Restraint and Seclusion: Navigating CMS Standards & Proposed Changes (W2028)

Date: Tuesday, May 10, 2022 Time: 9:00 a.m. – 10:00 a.m. CT

Speaker:

Sharon Courage, RN, BSN, MPH, Senior Consultant - Nash Healthcare Consulting

Cost: \$195 (per hospital, no charge for additional lines, recordings available up to 60 days after the webinar)

Target Audience

Chief Medical Officer, Chief Nursing Officer, Compliance Officer, Emergency Department Personnel, Joint Commission Coordinator, Medical Records, Quality Improvement personnel, Risk Manager, Legal Counsel

Course Curriculum

The Centers for Medicaid and Medicare Services (CMS) and the Joint Commission (TJC) require hospital staff to be educated on restraint and seclusion, and these topics continue to be major concerns for both CMS and TJC. CMS and TJC have also promulgated requirements for hospitals to prevent ligature risk and self-harm from patients who are suicidal. This session will provide resources to aid hospital staff in achieving compliance with the CMS and TJC requirements regarding restraint and seclusion. Participants will also learn how to assess a facility's ability to meet safety requirements and assess patients for risks of self-harm and suicide.

Learning Objectives

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

- Define the CMS restraint requirement of what a hospital must document in the internal log if a patient dies within 24 hours of having two soft restraints placed on the wrists.
- Recall that CMS requires that all physicians and others who order restraints must be educated on the hospital policy.
- Describe that CMS has restraint education requirements for staff.
- Discuss that CMS has specific items that need to be documented in the medical record for the one-hour face-to-face evaluation on patients who are violent and or self-destructive.

Speaker Bio

Sharon Courage is a registered nurse with a Master of Public Health. She has 30 years of experience in hospital quality and risk management, quality improvement, development of hospital programs, patient safety, and acute and long-term care. Since 2002, Courage has helped hospitals nationwide develop programs and system improvements in patient safety, quality and risk management, infection control, program assessment, and accreditation preparation. She has assisted with the development and implementation of regulatory plans of correction, and process development and implementation. She has also assisted hospitals with strategy development and implementation to meet Joint Commission and CMS compliance.

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