

# RHC COMPLIANCE

2020 Arkansas Annual Rural Health VIRTUAL Conference

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## RHC Conditions of Certification

- § 491.1 Purpose and scope.
- § 491.2 Definitions.
- § 491.3 Certification procedures.
- § 491.4 Compliance with Federal, State and local laws.
- § 491.5 Location of clinic.
- § 491.6 Physical plant and environment.
- § 491.7 Organizational structure.
- § 491.8 Staffing and staff responsibilities.
- § 491.9 Provision of services.
- § 491.10 Patient health records.
- § 491.11 Program evaluation.
- § 491.12 Emergency preparedness.

https://www.law.cornell.edu/cfr/text/42/491.4



### Safe accessible entrance



# Signage



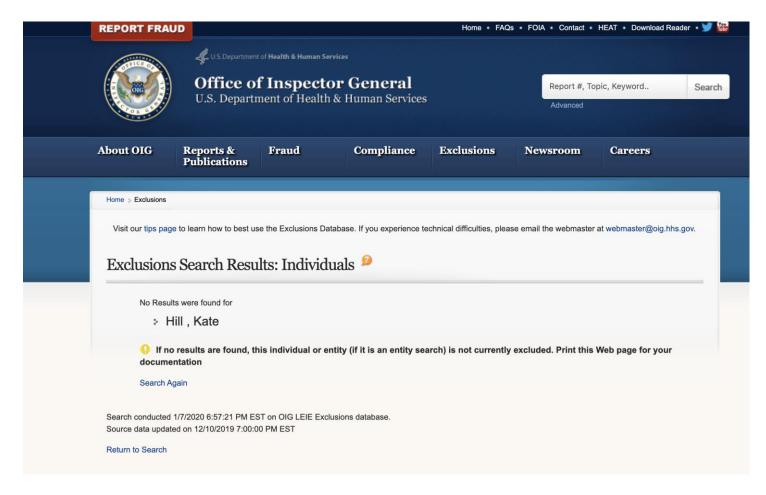
Name on the sign is consistent with CMS 855A application.



# 42 CFR 491.4 Licensing

Staff of the clinic or center are licensed, certified or registered in accordance with applicable State and local laws.

OIG Exclusion list: https://exclusions.oig.hhs.gov/



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### HR Files

- Application
- 1-9
- W-4
- OIG Exclusion
- Signed Job Description
- Standards of Conduct
- Performance evaluations, according to your clinic schedule
- Annual Training
- Competency
- Background checks as appropriate
- TB screening on hire
- Hep B for those who work with patients

# 42 CFR 491.4 Licensing

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	Personnel File Audit Tool Insert "Y" (YES) if evidence is found, "N" (NO) if evidence of is missing, or "NA" if not applicable.										
Staff Member	Application Resume or CV	I-9 and W-4 For Employees	O IG Exclusion	Signed Job Description	Signed Standard of Conduct	Orientation/ Training & Competency	Current License or Certification	Performance Evaluation	Background Check	Hepatitis B	ТВ



## Posted Hours

Posted Hours of Operation





### 42 CFR 491.5 location of the Clinic

- Report name changes to CMS.
- Report change in Medical Director to CMS.
- Update your 855a and CMS 29 as things change.



# 491.6 Physical Plant and Environment

#### 491.6 Physical plant and environment.

- (a) Construction. The clinic is constructed, arranged, and maintained to ensure access to and safety of patients, and provides adequate space for the provision of direct services. (Direct services means services provided by the clinic's staff)

  (b) Maintenance. The clinic has a preventive maintenance program to ensure
- **(b)** *Maintenance.* The clinic has a preventive maintenance program to ensure that:
  - (1) All essential mechanical, electrical and patient-care equipment is maintained in safe operating condition;
  - (2) Drugs and biologicals are appropriately stored; and
  - (3) The premises are clean and orderly.









# Complaint Posting

The complaint process is defined in a written document or waiting room display that includes the statement

"In the event your complaint remains unresolved with <clinic name>, you may file a complaint with our Accreditor, The Compliance Team, Inc. via their website (<a href="www.thecomplianceteam.org">www.thecomplianceteam.org</a>) or via phone 1-888-291-5353."





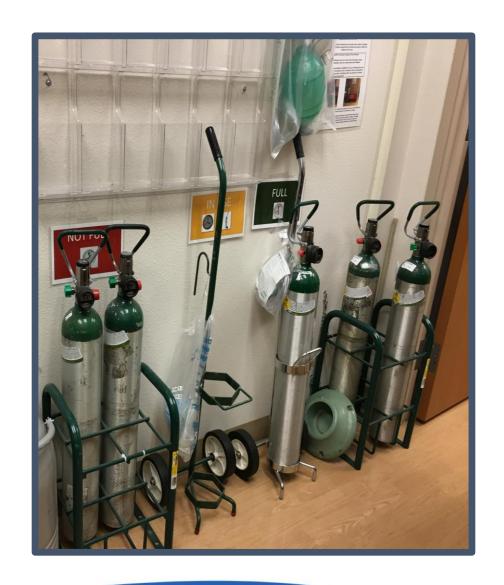


- Sharps containers cannot be easily accessible.
- Several states require specific times on emptying of sharps containers.
- Must be marked with Bio-Hazard sticker

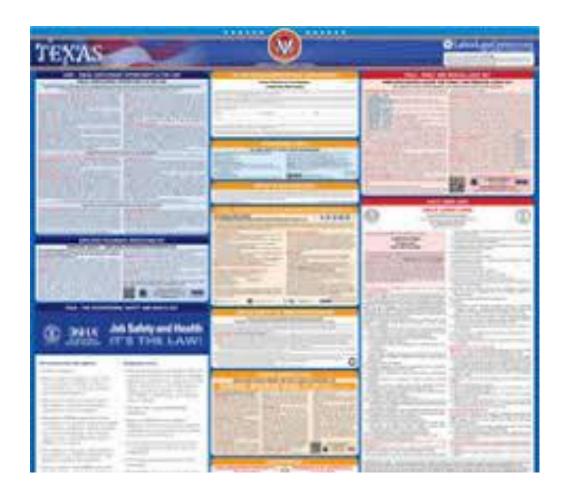




- Safe storage of Oxygen: chained or in an approved cart.
- Keep full separated from empty.



- State and Federal Posters are required to be in places visible to the staff.
- Make sure you have the current year.
- Provider based clinics must have these postings in the clinic even when the clinic in the hospital building.





# Physical Plant: Equipment

- All equipment resides on an Inventory List
- Manufacturer's IFUs determines need for Inspection vs Preventive Maintenance (PM)
- Process in place for tracking due dates for PM
- Evidence of initial inspection BEFORE use in patient care
- Annual Bio-Med inspection is evident with stickers or report
- Equipment not in use is labeled as such and stored away







































Fire Safety Process per State Regulations



# Why have vials become such a problem?

- Possibly a staff member does not know the difference between a single dose or multi-dose vial.
- Possibly a certain drug always comes to you as an MDV but your supplier sent a shipment where the drug was an SDV.
- Possibly we store MDVs and SDVs together making it easy to confuse.

#### What to do:

- Train all staff to always look at the vial to verify if it's an SDV or MDV and to check the date.
- Train staff that SDVs do not have a preservative in the vial and why that's important.
- In the drug closet, separate the MDVs from the SDVs
- Label all SDVs with a sticker







Single Dose Vials

Ensure Single-Dose Vials (SDVs) Are Never Used for More Than One Patient

#### **Multi Dose Vials**

Do Not Assume All Staff Know the Difference Between SDVs and MDVs.



# Why have vials become such a problem?

#### Multi Dose Vials





Single Dose Vials



**NEVER DATED** 





# Medications

Ensure Single-Dose Vials (SDVs) Are **Never** Used for More Than One Patient.

Once and done, discard!





# Medication Refrigerators



No medications in the door of the refrigerator Use water bottles to take up dead space



https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf



## Controlled Substances

- Controlled Substances (CS) locked in a Substantial Cabinet.
- Recordkeeping Logs for Ordering/ Dispensing.
- MDVs, Storage in Sample Closet, Med Fridge, or Emergency Boxes must be secured.



