

Continuous Survey Readiness for CAHs Part 2

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Host



Carolyn St. Charles is the Chief Clinical Officer for HealthTech. Carolyn has extensive experience working with rural hospitals to develop and strengthen Swing Bed programs. St. Charles earned a master's degree in Business Administration from the Foster School of Business at the University of Washington and a bachelor's degree in Nursing from Northern Arizona University.

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Feb – Jun 2026 webinars

All webinars are recorded for on-demand viewing.

Unlock the full potential of Care Coordination: What's new in 2026 for program growth and reimbursements?

Presenter: Carolyn St. Charles, RN, BSN, MBA – Chief Clinical Officer

Date: February 13, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/4r6lvOt>

Compassion fatigue – Building resilience

Presenter: Brian Merry, M.Ed., CEMSO, NRP - Director of EMS

Date: March 6, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/49KJOvp>

Swing Beds: An important resource for CAH - Part 1

Presenter: Carolyn St. Charles, RN, BSN, MBA – Chief Clinical Officer

Date: April 3, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/4qwYF3R>

Swing Beds: An important resource for CAH - Part 2

Presenter: Carolyn St. Charles, RN, BSN, MBA – Chief Clinical Officer

Date: April 17, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/45Pyq08>

Continuous survey readiness for CAH - Part 1: Regulatory Requirements

Presenter: Carolyn St. Charles, RN, BSN, MBA – Chief Clinical Officer

Date: May 15, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/3Nx2nMa>

Continuous survey readiness for CAH - Part 2: Environment of care, life safety and emergency preparedness

Presenter: Michael Jones CHSP, CHCM, CSSGB, FAL, HACP-IC, HACP-CMS, HACP-PE

Date: June 5, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/3YPJRkB>

Continuous survey readiness for CAH - Part 3: Credentialing and privileging

Presenter: Carolyn St. Charles, RN, BSN, MBA – Chief Clinical Officer

Date: June 26, 2026 | **Time:** 12pm CST

URL: <https://bit.ly/3NtjUA9>



Webinars |

Please feel free to write questions in the Chat Box



The webinar is recorded and the recording will be sent out within 3 business days



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Hospital Regulations: CAH Part 2 Environment of Care, Life Safety, and Emergency Preparedness

Michael Jones

CHSP, CHCM, CSSGB, FAL, HACP-IC, HACP-CMS, HACP-PE

June 5th, 2026



Objectives

- Understand the scope of hospital regulations
- Identify top cited deficiencies in EC, LS, and EM
- Explore strategies for sustained compliance

Why Regulations Matter

- Ensure patient and staff safety
- Meet accreditation standards
- Prevent citations and penalties



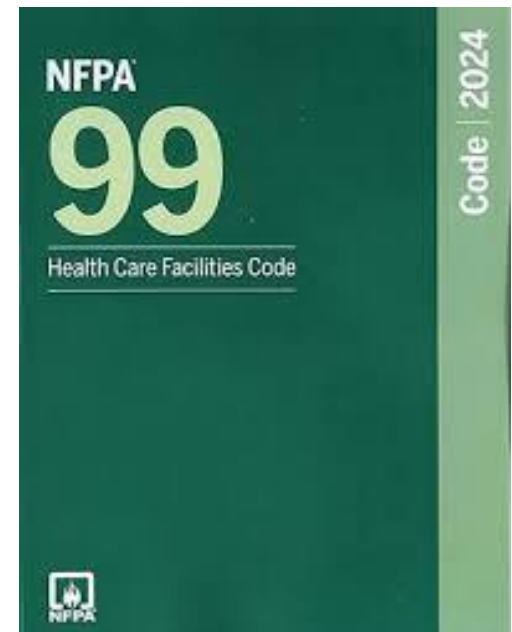
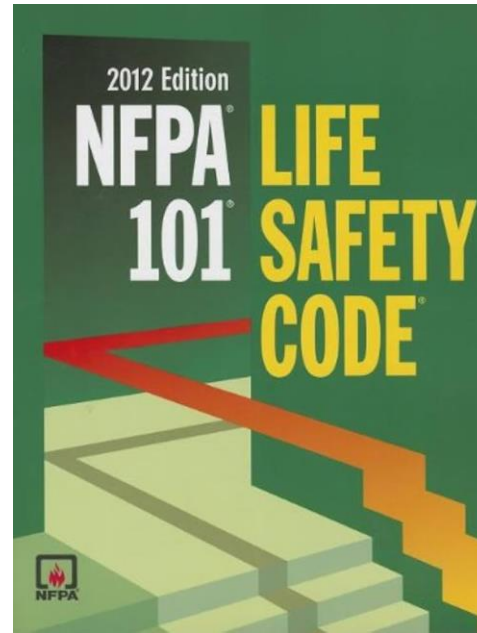
Regulatory Overview

- CMS (Centers for Medicare & Medicaid Services)
- The Joint Commission
- DNV, HFAP (other accreditors)
- NFPA (National Fire Protection Association)



NFPA and Compliance Codes

- NFPA 101: Life Safety Code
- NFPA 99: Health Care Facilities Code
- Integration with state and local fire codes



New vs Existing Health Care Occupancies



Buildings are considered existing healthcare facilities if construction plans were approved before **July 5, 2016**.

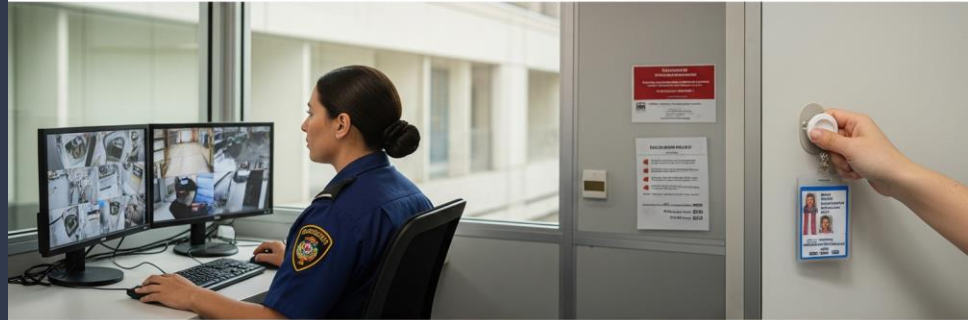
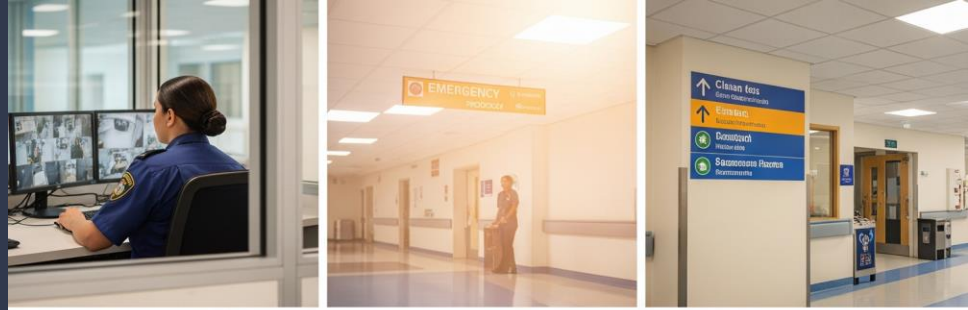
Overview of Environment of Care (EOC)

- Encompasses the physical environment
- Directly linked to safety, comfort, and continuity of care



EOC Components

- Safety
- Security
- Hazardous Materials & Waste



EOC Components

- Fire Safety
- Medical Equipment
- Utility Systems



Top EOC Deficiency: Egress Routes

- Blocked, locked, or improperly marked exits
- Obstructions in hallways



Top EOC Deficiency: Fire Safety Equipment

- Fire extinguishers not inspected
- Fire alarm testing not documented



Top EOC Deficiency: Hazardous Materials

- Improper storage of chemicals
- Missing MSDS/SDS documentation



Safety Data Sheet

SDS

PROPERTIES & PRECAUTIONS (See Section 9 for more information)

MSDS Data Sheet/Chemical & Toxicity Data

Physical and chemical properties of the chemical are listed in this section. The information is provided for your reference and is not intended to be used as a substitute for the actual product label or for the actual product.

Physical State	Appearance	Odor	Color
Solid	White	None	None
Liquid	Colorless	None	None
Gas	None	None	None

POTENTIAL HEALTH & ENVIRONMENTAL HAZARDS

This section provides information on the potential health and environmental hazards of the chemical. The information is provided for your reference and is not intended to be used as a substitute for the actual product label or for the actual product.

PROTECTIVE MEASURES

This section provides information on the protective measures that should be taken to minimize the risk of exposure to the chemical. The information is provided for your reference and is not intended to be used as a substitute for the actual product label or for the actual product.

REGULATORY INFORMATION

This section provides information on the regulatory requirements that apply to the chemical. The information is provided for your reference and is not intended to be used as a substitute for the actual product label or for the actual product.

Chemical Name	Manufacturer	Product Number
Hydrochloric Acid	Acros Organics	111111
Sulfuric Acid	Acros Organics	111111
Nitric Acid	Acros Organics	111111
Phosphoric Acid	Acros Organics	111111
Hydrofluoric Acid	Acros Organics	111111
Perchloric Acid	Acros Organics	111111
Chloroacetic Acid	Acros Organics	111111
Trichloroacetic Acid	Acros Organics	111111
Dichloroacetic Acid	Acros Organics	111111
Monochloroacetic Acid	Acros Organics	111111

Top EOC Deficiency: Medical Equipment

- Missed PM inspections
- Inadequate service records



Identifying EOC Risks

- Use of safety rounds
- Risk assessment tools
- Staff reporting mechanisms



Tools for EOC Monitoring

- Checklists
- Dashboards
- Audit tracking software



EOC Compliance Strategies

- Daily/weekly rounds
- Interdepartmental cooperation



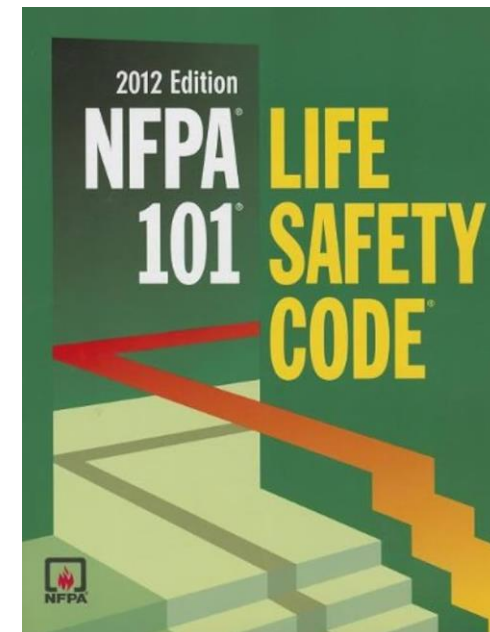
Transition: Life Safety Standards

- Focus on facility infrastructure and emergency egress



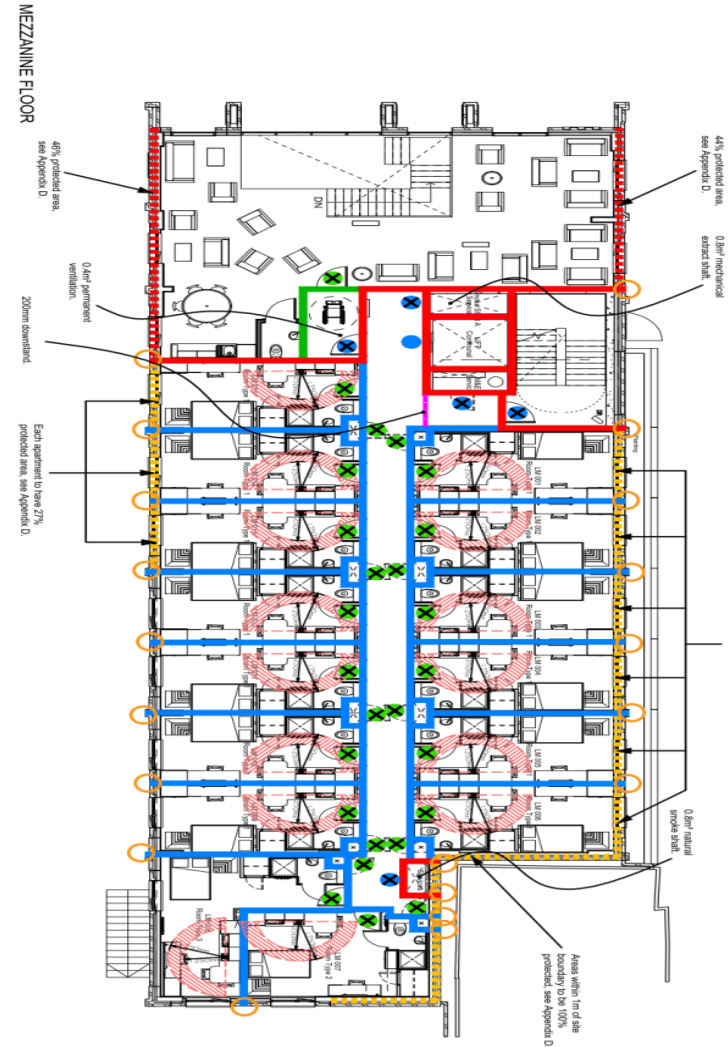
Life Safety Code (NFPA 101)

- Fire barriers
- Egress routes
- Fire doors



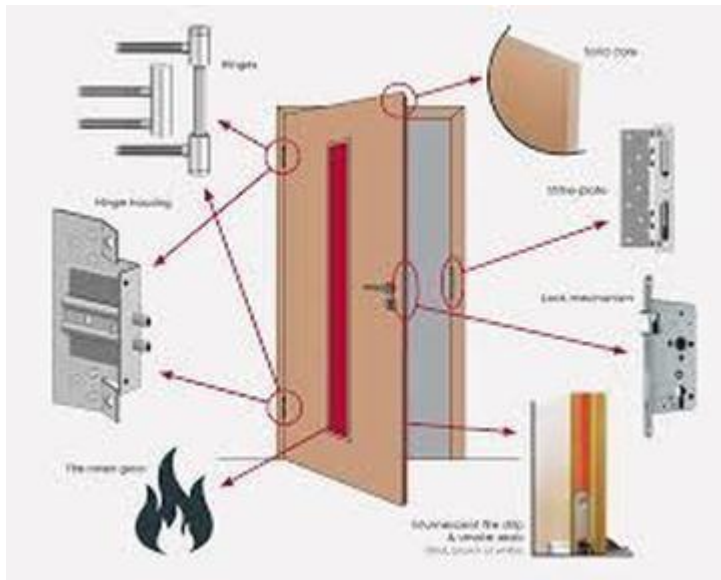
Life Safety System Components

- Alarms and detection
- Suppression systems
- Passive protection



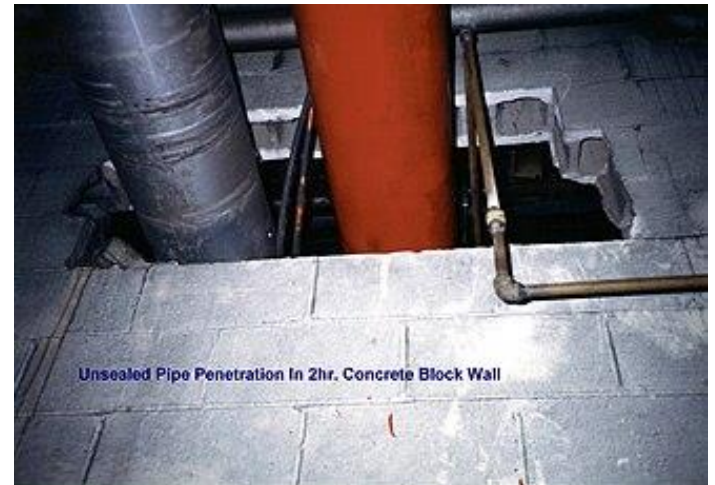
Common LS Deficiency: Fire Doors

- Latching issues
- Damaged or altered doors



Common LS Deficiency: Wall Penetrations

- Improperly sealed conduit or cabling
- Unsealed holes in fire-rated assemblies



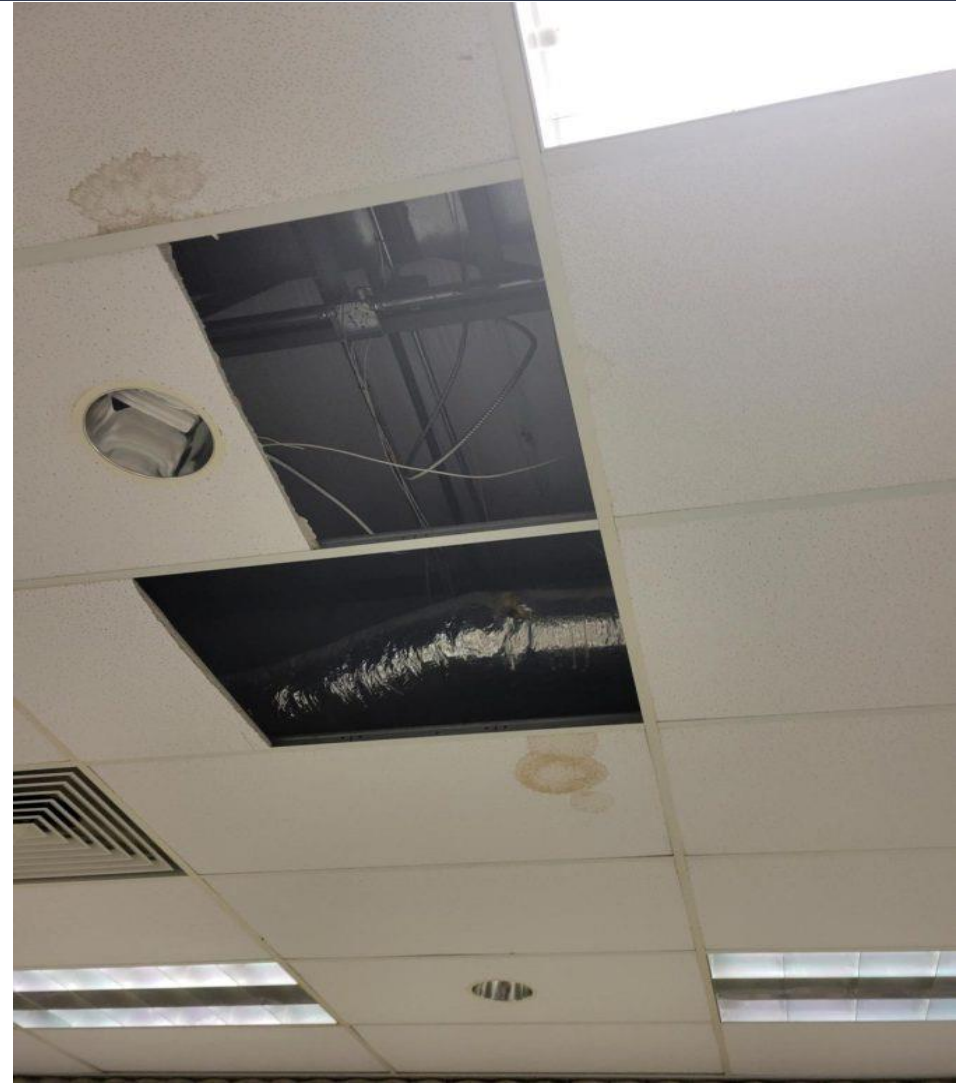
Common LS Deficiency: Signage

- Missing exit signs
- Non-functioning emergency lighting



Common LS Deficiency: Ceiling Tiles

- Missing or misaligned tiles in smoke compartments



Common LS Deficiency: Items on Sprinkler Piping

- Piping for approved automatic sprinkler systems is not used to support any other item



Assessing LS Risks

- Regular visual inspections
- Documentation reviews
- Barrier management programs



LS Compliance Best Practices

- Coordinate with contractors
- Review plans before facility changes



LS Compliance Best Practices

- Timely repairs
- Centralized documentation



Emergency Preparedness

Why it Matters

- Impact of recent disasters on healthcare
- CMS rationale for EP rule
- Protecting patient care, staff safety, and compliance



CMS Emergency Preparedness Rule

Four key elements:

1. Risk Assessment & Planning
2. Policies & Procedures
3. Communication Plan
4. Training & Testing



Emergency Operations Plan (EOP)

- Living document
- Update frequently
 - Minimum every other year
- Include facility plans
 - Evacuation plans
 - Shelter-in-place
 - Continuity of operations



EOP

- Evacuation & shelter-in-place
- Continuity of operations (COOP)
- Special populations
- Policies and Procedure -
CMS citation: §482.15(b)



Communication Plan

- Contact information
 - Employees
 - Partners
 - Outside Agencies
 - EM Vendors
- Internal alerts
- Coordination with local authorities
- HIPAA considerations
- Alternate communication methods
- Evacuation Communication
- CMS citation: §482.15(c)



Training and Testing

- Initial and annual training for staff
- Two drills annually (full-scale + tabletop)
- After-action reports and improvement plans
- CMS citation: §482.15(d)



EM/EP Documentation Requirements

- Written EP program and HVA
- Policies & procedures
- Training logs and exercise documentation



Common EM Deficiencies

- No record of drills / AAR Issues
- Outdated contact lists/
Communication Plan Issues
- Evacuation Plan Issues
- Failure to update HVA and/or
EOP
- Expired Supplies
- Staff Knowledge and Training



Strategies for Sustained Compliance

- Continuous improvement mindset
- Leadership engagement
- Staff accountability
- Community Partnerships

Continuous Improvement Cycle



Summary – EOC

- Frequent rounding
- Organized documentation
- Cross-functional involvement



**Key
Points**

Summary – LS

- Barrier management
- Life safety inspections
- Contractor coordination



**Key
Points**

Summary - EM

- Assess and Document
- Conduct regular drills
- Update emergency plans /Supplies
- Engagement



**Key
Points**

Q&A and Final Thoughts

