



## RESTRAINT & SECLUSION FINAL RULE: Implementing the CMS Hospital Patients' Rights Condition of Participation

REGISTER NOW FOR  
A TELEPHONE CONFERENCE FOR HOSPITALS SERVING  
MEDICARE/MEDICAID BENEFICIARIES WITH BEHAVIORAL HEALTH NEEDS

On December 8, 2006, the Centers for Medicare and Medicaid Services (CMS) issued a final rule on the hospital Condition of Participation on Patients' Rights, including new requirements on the use of restraint and seclusion. The rule is effective January 8, 2007 for all hospitals participating in Medicare and Medicaid, including both general hospitals and freestanding psychiatric hospitals. The 50-page final rule is available at <http://a257.g.akamaitech.net/7/257/2422/01jan20061800/edocket.access.gpo.gov/2006/pdf/06-9559.pdf>.

To help hospitals understand and meet the new requirements, the National Association of Psychiatric Health Systems has organized a special telephone conference call. The presentation, including CMS staff as faculty, will highlight the changes in the regulation as well as the types of organizational changes that hospitals need to consider to ensure compliance. Representatives of psychiatric nursing leadership will discuss the role of the trained registered nurse in the implementation of the rule. Also hear from a physician with responsibility for implementing policy for care of patients with behavioral health needs.

The telephone conference format allows you to get all the benefits of an interactive conference – without ever leaving your office – and without breaking your budget. Registration fees are per incoming line, not per participant. You can have as many people listen in on your speakerphone as you wish.

☑ Thursday, February 15, 2007, from 2pm – 4pm Eastern

### FACULTY:

☒ **Patricia A. Chmielewski, R.N., M.S.**  
Deputy Director, Division of Acute Care Services,  
Survey and Certification Group, Centers for  
Medicare and Medicaid Services,  
Baltimore, MD

☒ **Lynn DeLacy, Ph.D, R.N., C.N.A.A.**  
Director, Northern Virginia Mental Health Institute,  
Falls Church, VA

☒ **Janice A. Graham, R.N., M.S.**  
Division of Institutional Quality Standards,  
Clinical Standards Group/OCSQ, Centers for  
Medicare and Medicaid Services, Baltimore, MD

☒ **Dorothy Hill, R.N., C.**  
Chief Executive Officer, Acadia Hospital,  
Bangor, ME

☒ **Harold Schwartz, M.D.**  
Psychiatrist-in-Chief & V.P. Behavioral Health,  
The Institute of Living/Hartford Hospital, Hartford, CT

☒ **MODERATOR: Kathleen McCann, R.N., Ph.D.,**  
director of clinical and regulatory affairs,  
National Association of Psychiatric Health Systems

# REGISTRATION FORM

NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS

TELEPHONE CONFERENCE ON

## "RESTRAINT & SECLUSION FINAL RULE:

Implementing the CMS Hospital Patients' Rights Condition of Participation"

Thursday, February 15, 2007 (from 2pm - 4pm Eastern)

**Pre-registration and pre-payment are required. American Express, MasterCard, and Visa accepted.**

Please indicate if you are:

NAPHS member: \$150     Non-member: \$225

**Please indicate the individual who should receive confirmation of registration and a "Personal Identification Number" to access the conference calls:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

E-mail (essential so we can send you advance materials): \_\_\_\_\_

*Although credits are not offered, presenter biographies and objectives will be posted at [www.naphs.org](http://www.naphs.org) prior to the presentation for in-house staff-development purposes.*

**Can't participate in the call? A compact disc (CD) is available post-teleconference.**

**NAPHS member:**     \$150 (or  \$125 for teleconference participant)

**Non-member:**     \$225 (or  \$200 for teleconference participant)

**TOTAL PAYMENT ENCLOSED** (payable to NAPHS): \$ \_\_\_\_\_

[NAPHS Federal Tax ID # 22-166-1978]

**OR**

**PAY BY CREDIT CARD** (MasterCard, Visa, and American Express accepted):

Credit card payment by:     Visa \*     MasterCard \*     American Express

Account Number: \_\_\_\_\_

**\* VISA/MASTERCARD HOLDERS: YOU MUST PROVIDE YOUR THREE-DIGIT CVV CODE, WHICH CAN BE FOUND ON THE BACK OF YOUR CARD. \_\_\_\_\_**

Name of Account Holder: \_\_\_\_\_

Signature \_\_\_\_\_ Expiration Date \_\_\_\_\_

**RETURN TO:** NAPHS, 701 13<sup>th</sup> Street, NW, Suite 950, Washington, DC 20005-3903

**FAX:** 202/783-6041

**QUESTIONS:** Call Brenna Zwanzig at 202/393-6700, ext. 106

National Association of Psychiatric Health Systems, 701 13<sup>th</sup> Street, NW, Suite 950, Washington, DC 20005-3903

Phone: 202/393-6700, Fax: 202/783-6041, E-mail: [naphs@naphs.org](mailto:naphs@naphs.org), Web: [www.naphs.org](http://www.naphs.org)