

## Long-Term Care Survey Alert

### RISK MANAGEMENT: Don't Let Inflexible CPR Policies Lock Your Facility Into F Tags

**2 key guidelines give your facility wiggle room.**

In developing effective cardiopulmonary resuscitation policies and procedures, follow these rules to avoid trouble down the line.

**Rule No. 1:** Make the policies and procedure realistic and achievable. The time frames for CPR spelled out by the facility's policies and procedures can "shoot [it] in the foot," cautions attorney **Matthew Murer**, an attorney with **Foley & Lardner** in Chicago. "It may sound reasonable when people are sitting around a conference table to say we will do this in x minutes and y in a certain number of hours." But in an emergency, you may not be able to hit those goals, he says.

**Rule No. 2:** Individualize the CPR policies and procedures to fit the facility. For example, take a look at your staff's expertise and the facility's case-mix. "A subacute facility with higher than average acuity will have a different expectation for managing cardiopulmonary arrest ...," says **Christopher Puri**, an attorney with **Boult Cummings Connors & Berry** in Nashville, TN.

**Taking the no-code road:** Some nursing facilities are setting themselves up as "no code" facilities where they don't do CPR -- much like a non-smoking facility, says **Barbara Miltenberger, JD**, with **Husch & Eppenberger** in Jefferson City, MO. Residents agree to the no-code policy at admission. The no-code strategy doesn't work well if the facility admits a lot of rehab patients, she adds.