

Provider Policy Around the Administration of Cardiopulmonary Resuscitation (CPR)

CBH recognizes the potential need for the administration of CPR. Due to the various Commonwealth licensing and regulatory requirements, as well as accreditation requirements (e.g. JCAHO, CARF), providers are required to develop a CPR policy that addresses the specific needs of members served. Providers meeting the new requirements through accreditation or licensing requirements will not be required to develop a new policy.

Currently, CBH requires:

100% CPR Certification must be maintained for:

- Physicians
- Children’s residential treatment programs (RTF)
- Partial hospitalization programs

All other programs must ensure that 50% of staff holds current CPR certification.

Effective January 1, 2021, the current requirement as stated above will be replaced with the following in all levels of care:

1. The provider must establish a written policy with accompanying procedures enabling staff to identify persons in need of physical emergency help. The policy should take into consideration staffing patterns, as well as staff availability within the facility.
2. The policy must meet all licensing, accreditation, and regulatory requirements regarding staff CPR certification and renewal.
3. The policy must include the protocol for the administration of CPR (if the provider is required by licensing or accreditation requirements).
4. The policy must include the protocol for the notification of emergency services.
5. The policy will apply to services on all levels of care that are provided in person. Those providers currently utilizing only telehealth must develop a CPR policy prior to providing services in person.

Providers are not required to submit the policy to CBH but must maintain the policy and make it available upon request.

Please submit questions about this Bulletin to CBH.ComplianceContact@phila.gov.