



Presents

Surveys Under the New Conditions of Participation

May 31, 2018 (10:30 a.m. – 12:00 p.m. Central)

Webinar Recording Available

In this interactive program we will discuss the new survey G tags and lessons learned since implementation. Find out the top survey deficiencies so far under the new CoPs. We will discuss the struggle of coordination of care, and care planning, and how these items touch almost every aspect of the business. A deficiency in one item, can touch several areas. Know what you need to do now to comply with the standards! During this intermediate session participants will learn effective strategies and approaches to prepare for survey and how to stay in compliance.

Who should attend? Agency Directors, Clinical Managers and Nurse Case Managers.

After this session learners will have a working knowledge of:

- The number of charts based on unduplicated census that the surveyors will be reviewing
- Level 1 and Level 2 G tags and what elevates an agency to conditional level deficiencies
- What items need to be corrected now before your survey



Faculty: J'non Griffin, RN MHA, HCS-D, HCS-H, HCS-C, is the president of Home Health Solutions, LLC, and a nationally recognized speaker with over 30 years of home health experience. J'non has experience as a field nurse, supervisor, quality assurance director, staff development and appeals coordinator, and chief operations officer. Her responsibilities have included risk management, acting as compliance officer, development of policies and forms, survey compliance, appeals of Medicare

denials, writing Corrective Action Plans, start-ups of parent and branch agencies, consulting with agencies on a variety of subjects and education of staff.

Registration Fee: Member rate is \$159.00 - Non-members \$259.00. Indicate if you will be calling into the live webinar or purchasing the audio recording (fee is the same). The live webinar includes the opportunity to ask questions of the presenters. If you desire to purchase both the live webinar and the audio recording, pay the registration fee and an additional \$30.

Continuing Education: The presenters and program planners have no conflict of interest in regard to this webinar. RNs and LPNs must participate in the entire presentation in order for contact hours to be awarded. To apply for nursing contact hours, please mail an evaluation form and a \$10 processing fee for each individual requesting hours. Additionally, send in a completed sign-in sheet, listing the individuals at your facility that participated and noting those requesting contact hours.

Individuals requesting contact hours will receive a certificate of contact hours earned. Please make sure that you enter the Contact Person's name in the Registration Form. All correspondence and site registration information will be sent to this person. No commercial support has been provided for this program.

Ohio Council for Home Care and Hospice is an approved provider of continuing nursing education by the Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91) (OH -157, 4/1/2019).

**Surveys Under the New Conditions of Participation
Webinar Registration Form
May 31, 2018 (10:30 a.m. to 12:00 p.m.)**

REGISTRATION INSTRUCTIONS:

1. Use a separate form for each registration. Photocopy of original is acceptable. Each registration is for one (1) phone connection only. **SHARING OF REGISTRATION OR FEES WITH OTHER AGENCIES AND/OR INDIVIDUALS IS PROHIBITED.**
2. **No registration will be accepted without payment in full** by either a credit card or business check (Personal checks cannot be accepted). Visa, MasterCard, Amex and Discover are acceptable forms of credit card payments. The webinar fee must be paid in full before the registrant will be allowed to participate in the program. A confirmation will be sent via email to verify site registration, as will the handouts, Internet link and 800 number for entering the webinar, and instructions for participation. If your **Contact Person** does not receive the E-mail confirmation two (2) business days prior to the webinar, please contact our office to verify your status, 337-231-0080.
3. **Faxed registrations will be accepted only with payment by a credit card).** Credit card information must be complete and contain the authorized signature. Send completed forms to P.O. Box 80124, Lafayette, LA 70598, or FAX 337-231-0089. Mail and/or faxed registrations represent your commitment to attend and cancellation policies will apply.
4. **Please note our cancellation policy:** If you cancel your registration prior to five business days before the program, you will receive a refund less 25% for administrative costs. All cancellations must be made in writing. No refunds for cancellations or exchanges within five business days of the program. If due to unforeseen circumstances we must cancel this event, registrants will receive a full refund.
5. Payments are not deductible as charitable contributions for federal income tax purposes. However, payments may be deductible under other provisions of the IRS.

Please complete the following information and mail or fax (a credit card must be used to provide payment at the time of faxing a registration) with payment to: HomeCare Association of Louisiana, P.O. Box 80124, Lafayette, LA 70598, Phone: 337-231-0080, Fax: 337-231-0089.

Contact Person: _____ E-mail: _____

Agency: _____

Address: _____

City/State/Zip: _____

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REGISTRATION FEE PER SITE/PHONE CONNECTION: Registration fees are for one (1) phone connection. For additional sites, please copy this registration form and send in with proper payment amount. Indicate if you will be calling into the live webinar or purchasing the audio recording (fee is the same). The live webinar includes the opportunity to ask questions of the presenter. Contact hours may be earned for listening to the audio recording up to 6 months following the live webinar. If you desire to purchase both the live webinar and the audio recording, pay the registration fee and an additional \$30.

Member

☐ \$159.00

Non-Member

☐ \$259.00

TOTAL AMOUNT ENCLOSED

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Live webinar or audio recording? ☐ Live Webinar ☐ Audio Recording

I wish to purchase the live webinar AND the audio recording ☐ (Pay registration fee and an additional \$30)

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Name on Card: _____ Card Number: _____

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