

ACHC WORKSHOP: HOME HEALTH & HOSPICE ACCREDITATION

PRESENTED BY:

NITA FOWLER RN, BSN

ACHC HOME HEALTH, HOSPICE & PRIVATE DUTY CLINICAL MANAGER



WHEN: Home Health - Monday, November 8, 2010
Hospice - Tuesday, November 9, 2010
7:30am - 4:30pm

WHERE: Hilton Garden Inn - RDU Airport
1500 RDU Center Drive
Morrisville, NC 27560

COST: \$300 per day or \$400 for both days
Breakfast and lunch provided.

ACHC presents a Home Health Accreditation workshop Monday, November 8th and a Hospice Accreditation workshop Tuesday, November 9th, designed to help you prepare for ACHC Accreditation. This workshop is perfect for renewing your accreditation or if you're just getting started. Attend either the Monday or Tuesday session for \$300, or attend both days for \$400. Nita Fowler will guide you through the accreditation process, review the ACHC standards, including the crosswalk for CMS (Medicare) Conditions of Participation and allow ample time for questions and answers. Please download the ACHC Accreditation Standards prior to the workshop and bring a copy with you in order to follow along. The standards are available for free at <http://store.achc.org/>.

LEARNING OBJECTIVES

- Review of ACHC standards for Home Health (Monday) and Hospice (Tuesday)
- ACHC Application Process
- Learn the most common deficiencies and how to avoid them
- Review the crosswalk for ACHC Standards and CMS Conditions of Participation
- Ample question and answer time to ask the expert

AGENDA - HOME HEALTH - (MONDAY), HOSPICE - (TUESDAY)

7:30 - 8:00 am	Registration and Continental Breakfast
8:00 - 9:00 am	ACHC Accreditation Process
9:00 - 10:30 am	ACHC Accreditation Standards
10:30 - 10:45 am	Coffee Break
10:45 - 11:30 am	ACHC Accreditation Standards
12:00 - 1:00 pm	Lunch featuring Q&A
1:00 - 2:30 pm	ACHC Accreditation Standards
2:30 - 2:45 pm	Afternoon Break
2:45 - 4:30 pm	ACHC Accreditation Standards

REGISTRATION

Complete the attached registration form and return to ACHC with payment. Space is limited, register today.
(No on-site registration available.)

ACCOMMODATIONS

A block of rooms has been reserved at a special rate of \$129 single/double per night. Reservations can be made by contacting the Hilton Garden Inn RDU at 919.840.8088, prior to October 25, 2010. Please mention that you are with the ACHC workshop to receive the discounted rate.

ABOUT NITA FOWLER

Nita has over 20 years of home health and hospice experience, beginning as a staff nurse and later moving into management positions. She is currently the Home Health, Hospice & Private Duty Clinical Manager at ACHC.

QUESTIONS? CONTACT STACEY HAHN AT 919.785.1214 OR SHAHN@ACHC.ORG

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REGISTRATION FORM (PLEASE PRINT CLEARLY)

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

ARE YOU CURRENTLY ACCREDITED? Y OR N IF SO, BY WHO? _____

ATTENDEES:

		<u>CIRCLE ONE</u>		
NAME: _____	EMAIL: _____	HH	HSP	BOTH
NAME: _____	EMAIL: _____	HH	HSP	BOTH
NAME: _____	EMAIL: _____	HH	HSP	BOTH
NAME: _____	EMAIL: _____	HH	HSP	BOTH
NAME: _____	EMAIL: _____	HH	HSP	BOTH
NAME: _____	EMAIL: _____	HH	HSP	BOTH

ONLY MON (HOME HEALTH) ATTENDEES ____ x \$300 = TOTAL \$ _____

-OR- ONLY TUES (HOSPICE) ATTENDEES ____ x \$300 = TOTAL \$ _____

BOTH MON & TUES (HOME HEALTH & HOSPICE) ATTENDEES ____ x \$400 = TOTAL \$ _____

GRAND TOTAL \$ _____

METHOD OF PAYMENT:

___ CHECK (PAYBALE TO ACHC) AND MAILED TO THE ADDRESS BELOW

___ CREDIT CARD (MC, VISA OR AMEX)

CARD NUMBER: _____ EXP. DATE: _____ SEC CODE: _____

NAME ON CARD: _____ SIGNATURE: _____

BILLING ADDRESS: _____

PLEASE RETURN THIS FORM WITH PAYMENT TO:

Accreditation Commission for Health Care, Inc

Attn: Stacey Hahn, Marketing Event Coordinator

Mail: 4700 Falls of Neuse Rd., Ste. 280 -or- **Fax:** 919.785.3011 -or- **Email:** shahn@achc.org
 Raleigh, NC 27609

PAYMENT MUST BE SUBMITTED IN ORDER TO REGISTER. SPACE IS LIMITED, REGISTER TODAY.
 QUESTIONS? CONTACT STACEY HAHN AT 919.785.1214 OR SHAHN@ACHC.ORG.