



# Being In A State of Survey Readiness and Understanding Interpretive Guidelines Webinar

September 4, 2019

12:00 p.m. CT/ 11:00 a.m. MT

1.5 Continuing Education Contact Hours  
awarded by Iowa Western Community College, Iowa Board of Nursing Provider #6



**N e b r a s k a**  
Home Care Association



## Diane Link, RN

Diane Link is an RN with over 25 years of home health and hospice experience. Diane received her MHA from Mount St. Mary's University and has a Green Belt in Lean Six Sigma. Her past roles in home health and hospice include: field nurse, PI nurse, clinical manager, executive director of home health and hospice, accreditation surveyor and clinical director for major consulting company. Diane is currently managing partner/COO of Curaport and owner of her own consulting agency - Link Healthcare Advantage. She is author of *The Hospice Guide to Quality Care and Reporting* published by HC Pro and is known for her industry regulatory knowledge and passionate presentation style.

**Diane Link, RN has identified no actual, potential or perceived conflict of interest. The Nurse Planners have identified no actual, potential or perceived conflict of interest.**

### Purpose Statement

By participating in this educational session, Home Health Agencies will become more knowledgeable about the changes in the CMS Home Health Interpretive Guidelines, the changes in the CMS Emergency Preparedness Regulation, understand the Home Health Emergency survey citations for 2018 and know what next steps are needed to be ready for a Home Health survey, based upon the top 10 survey citations.

### Objectives

1. Identify key changes in the CMS Interpretive Guidelines.
2. Identify changes in Emergency Preparedness Regulation.
3. Identify top ten survey citations for 2018.
4. Identify what agencies can do now to be survey ready based on the top 10 survey citations.

### In order to receive a Certificate of Completion:

1. Attend the entire webinar.
2. Sign and return an attendance sheet.
3. Complete and submit a continuing education half sheet.
4. Complete and submit the webinar evaluation form.

## Agenda

- |                    |   |
|--------------------|---|
| 12:00 -12:30 p.m.  | Review changes in the CMS interpretive guidelines that impact surveys                         |
| 12:30 - 12:45 p.m. | Review the changes in the Emergency Preparedness guidelines regarding training and education. |
| 12:45 - 1:15 p.m.  | Review citations from CMS surveys with examples.  |
| 1:15 - 1:30 p.m.   | Identify next steps for your agency to be survey ready. Q & A/Evaluation                      |

# Being In A State Of Survey Readiness and Understanding Interpretive Guidelines

Name(s) of Participant(s) and Credentials (if applicable)

1. \_\_\_\_\_ Email : \_\_\_\_\_
2. \_\_\_\_\_ Email : \_\_\_\_\_
3. \_\_\_\_\_ Email : \_\_\_\_\_
4. \_\_\_\_\_ Email : \_\_\_\_\_
5. \_\_\_\_\_ Email : \_\_\_\_\_
6. \_\_\_\_\_ Email : \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Nebraska Home Care Association Member Fee:

Flat rate for an unlimited number of people from your agency/company/organization to attend \$150 \$ \_\_\_\_\_

Each representative wanting contact hours (nursing CE) to be filed with the Iowa Western Board of Nursing (each representative) \_\_\_\_\_ x \$5 \$ \_\_\_\_\_

Prospective Nebraska Home Care Association Member Fee:

Flat rate for an unlimited number of people from your agency/company/organization to attend \$250 \$ \_\_\_\_\_

Each representative wanting contact hours (nursing CE) to be filed with the Iowa Western Board of Nursing (each representative) \_\_\_\_\_ x \$5 \$ \_\_\_\_\_

☐ Our agency/organization is unable to attend the live event, but wishes to purchase the recording.

**Total** \$ \_\_\_\_\_

Note: A \$3 processing fee will be added to all credit card transactions.

## Cancellation Policy:

A 50% fee refund will be given on cancellations submitted to the Nebraska Home Care Association office by August 28, 2019. All refunds will be processed after accounts have been completed.

## Payment Methods

☐ Check - Print this form, fill it out, and send to the Nebraska Home Care Association with a check made payable to the Nebraska Home Care Association.

☐ Credit Card - [Click here to register/pay online.](#)

**Mail your registration form with payment information to:**

**Nebraska Home Care Association • 1633 Normandy Ct., Suite A • Lincoln, NE 68512 or Fax to 402.476.6547 • Email: [nebraskahomecare@assocoffice.net](mailto:nebraskahomecare@assocoffice.net)**

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.