

HealthCap®
Continuing Education Seminar

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QUALITY
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STILL FALLING FOR YOU?

A MODERN LOOK AT FALL PREVENTION

August 2, 2012

Embassy Suites Omaha - Downtown/Old Market, Omaha, Nebraska

ahca ncal
preferred provider of liability insurance



HealthCap RMS is accredited as a provider of continuing education by the American Nurses Credentialing Center's Commission on Accreditation.



National Association
of Long Term Care
Administrator Boards

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SEMINAR AGENDA

7:30 - 8:00	Registration & Breakfast
8:00 - 9:00	The Myth & Variables Part 1
9:00 - 10:30	The Variables Part 2
10:30 - 10:45	Break
10:45 - 12:00	Assessments
12:00 - 12:45	Lunch
12:45 - 2:00	Care Plans & Interventions
2:00 - 2:15	Break
2:15 - 3:45	Claims Review
3:45 - 4:00	Q&A, Evaluations, Closing Remarks

SEMINAR OBJECTIVES

- Identify the importance of performing fall risk assessments utilizing a variety of tools
- Identify factors that increase the risk of falls
- List appropriate/creative interventions that may assist in preventing falls

ANCC APPROVED: 6.5 CONTACT HOURS

NAB APPROVED: 6.5 CEU'S

This educational offering has been reviewed by the National Continuing Education Review Service (NCERS) of the National Association of Boards of Examiners of Long Term Care Administrators (NAB) and approved for 6.5 clock hours and 6.5 participant hours.

NOTE TO ATTENDEES

Attendees are responsible for signing in at the beginning of the session and will receive a certificate at the end of the program. No certificates will be available prior to the conclusion of the program and no partial credit hours will be awarded.

THE PRESENTERS



Angie Szumlinski, NHA, RN-BC, RAC-CT, BS
Director, HealthCap RMS

Angie is the Director of HealthCap RMS where she oversees risk management, education and assessments of approximately 2,000 facilities across the country. A proven leader in the long term care industry, Angie has a wealth of experience in the operational and clinical aspects of the industry, including experience as an Administrator, Director of Nursing, Corporate Quality Assurance Coordinator and as an independent consultant.



John P. Hessburg, JD
Kitch Drutchas Wagner Valitutti & Sherbrook

John is a Principal in the firm of Kitch Drutchas Wagner Valitutti & Sherbrook, P.C., in Detroit, Michigan, where he heads the firm's Long Term Care Practice Group. John's firm has been representing healthcare providers for 40 years. He has been the lead consulting attorney for HealthCap for over five years. His Long Term Care Practice includes general healthcare, regulatory and administrative law, as well as civil and criminal defense.

REGISTRATION FORM

REGISTRATION IS EASY, YOU CAN REGISTER:



Online: www.HealthCapUSA.com (Credit Card Only)



By Phone: Call 877-855-HCAP (Credit Card Only)



By Fax: 734-996-1261 (Credit Card Only)



By Mail: Complete this form and mail it to:
HealthCap RMS
Attn: Sophia Alexander
201 S. Main Street, Suite 200
Ann Arbor, MI 48104

FACILITY INFORMATION

Name of Facility: _____

Street Address: _____

City: _____ State: _____ Zip: _____

HealthCap Member: ☐ Yes ☐ No

LeadingAge / NHCA Member: ☐ Yes ☐ No

ATTENDEE INFORMATION (1)

Name: _____

Title: _____

Email: _____

Phone: (_____) _____

Licence: _____ Number: _____

Licence: _____ Number: _____

REGISTRATION FEES

First 2 HealthCap Registrants FREE

Additional HealthCap Registrants _____ x \$100 = _____

LeadingAge / NHCA Registrants _____ x \$100 = _____

Other Registrants _____ x \$150 = _____

TOTAL = _____

ATTENDEE INFORMATION (2)

Name: _____

Title: _____

Email: _____

Phone: (_____) _____

Licence: _____ Number: _____

Licence: _____ Number: _____

FOR ADDITIONAL ATTENDEES, PLEASE PHOTOCOPY THIS FORM

PAYMENT INFORMATION

☐ Check (Payable to HealthCap RMS) ☐ MasterCard ☐ Visa ☐ American Express

Name on Card: _____

Credit Card Number: _____ Expiration Date: _____ Security Code: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Date: _____

HOW DID YOU HEAR ABOUT THIS SEMINAR?

☐ Association ☐ Insurance Broker ☐ Email ☐ Direct Mail ☐ Friend/Co-worker ☐ Search Engine
☐ Other (please specify): _____

CANCELLATION POLICY

All cancellations must be received at least 48 hours before the start of the event. Registration refunds are subject to a \$20 cancellation fee. Cancellations must be received in writing by fax (734-996-1261 ATTN: Sophia Alexander) or by mail (HealthCap RMS, ATTN: Sophia Alexander, 201 S. Main Street, Suite 200, Ann Arbor, MI 48104.) No refunds will be made for requests received after that time.

**AUGUST 2, 2012
OMAHA, NE**