# TOP GUN SCHOOL for Assisted Living Nurses



This three-day training program is designed for nurses who want to remain current about the latest in assisted living and sharpen the skills necessary to meet the needs of the medically diverse population for whom they care.

### 19 nursing contact hours approved

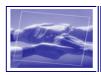
This continuing nursing education activity was approved by the New Jersey State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation



September 22, 23 & 24, 2014

**Health Care Association of New Jersey** 

Executive Headquarters 4 AAA Drive, Suite 203, Hamilton, NJ



# TOP GUN SCHOOL for Assisted Living Nurses September 22, 23 & 24, 2014 COURSE AGENDA

MONDAY, SEPTEMBER 22, 2014 ———

8 a.m. - Registration & continental breakfast

#### 8:30 to 9:30 a.m.

#### RISK MANAGEMENT FOR ASSISTED LIVING NURSES AND FACILITIES

Assisted living nursing is a unique domain of practice and is not exempt from professional liability crises. This segment will focus on accurate documentation, care planning and early intervention risk management resolution strategies.

Eric D. Heicklen, Esquire - Buchanan, Ingersoll & Rooney, P.C.

#### 9:30 to 10:30am

#### LICENSURE PROCEDURES & ENFORCEMENT OF NURSE LICENSURE

**REGULATIONS** This session will help you to understand the role of the nurse along with the licensure procedures and regulations in an assisted living environment. You will learn the importance of nurse follow-up and the overall coordination of services and personnel functions along with education and the development of communication with residents, families, staff and the interdisciplinary team.

Beth Bell, RN - Professionals for Quality LLC

10:30 to 10:45 a.m. Break

10:45 a.m. to 12:15 a.m. LICENSURE PROCEDURES continued Beth Bell, RN - Professionals for Quality LLC

12:15 to 12:45 p.m. Complimentary lunch

#### 12:45 to 1:30 p.m.

NURSE'S ROLE IN THE SURVEY PROCESS Preparing for survey can be a challenge for the nurse in assisted living. This session will stress the importance of accurate documentation and follow-up monitoring for spell of illness and incidents. Systems for health care plans will be reviewed and observations of medication administration and MAR documentation, as well as monitoring and documenting pain, will be discussed. Beth Bell, RN - Professionals for Quality LLC

#### 1:30 to 2:45 p.m.

MANAGING CONFLICT Conflict arises when values, perspectives and opinions are contradictory within an organization. You will discuss the impact of conflict on team morale, types of actions that contribute to conflict, and specific actions that can be taken to reduce or eliminate conflict.

Denise Kish, LNHA, Director, Organizational Development and Service Excellence, Christian Health Care Center

#### 2:45 to 3 p.m. Break

#### 3 to 4:15 p.m.

**EMPLOYMENT LAW AND CODES OF CONDUCT** This session will help you understand the employment codes of conduct as well as the hiring and terminating employees, and compliance with employment law. The target issues are specific to the assisted living resident rights and conduct.

Monica Vir, Esquire - Lindabury, McCormick, Estabrook & Cooper, P.C., Legal Counsel for the New Jersey Assisted Living Council

4:15 to 4:30 p.m. - Evaluations / Certificates awarded

#### TUESDAY, SEPTEMBER 23, 2014

#### 8 a.m. - Registration & continental breakfast

#### 8:30 to 9 a.m.

**UPDATE - WHERE ASSISTED LIVING IS TODAY** Overview of the contemporary assisted living issues in today's working environment along with potential future changes.

Kathy Fiery, MS, CALA, LNHA, Director, Assisted Living and Alternative Care - HCANJ

#### 9 to 10 a.m.

#### USING THE INTERACT QUALITY PROGRAM IN ASSISTED LIVING This

presentation will address the INTERACT Quality Program tools which are used to improve communication of the nurse to other nurses, physicians, nurse practitioners, staff, resident and family members. The quality improvement tools to measure hospital admission and re-admission as well as advanced care planning for end of life decisions, and delivery of person-centered care will also be reviewed.

Loretta Kaes, RN, B-C, B-AL, LNHA, CALA, Director, Quality Improvement and Clinical Services - HCANJ

10 to 10:15 a.m. Break

#### 10:15 to 11:30 a.m.

**INTERACT** continued

Loretta Kaes, RN, B-C, B-AL, LNHA, CALA, Director, Quality Improvement and Clinical Services - HCANJ

11:30 a.m. to 12 p.m. Complimentary lunch

#### 12 to 1:15 p.m.

#### POTENTIALLY AVOIDABLE HOSPITALIZATION FOR ASSISTED LIVING

This session will help you to understand the philosophy of recovery care, chronicity of disease process, medication management and resident education.

Marjorie Cuccinello, RN, BC, IT Clinical Development - Hospicomm Inc.

Elaine Jeffers, RN, Vice President of Health Services - Chelsea Senior Living

1:15 to 1:30 p.m. Break

#### 1:30 to 2:45 p.m.

## PSYCHOTROPIC MEDICATION REDUCTION REGULATION REVIEW & MONITOPING PSYCHOTPOPIC MEDICATIONS Know the difference between

MONITORING PSYCHOTROPIC MEDICATIONS Know the difference between antipsychotic and anxiolytic medications, define gradual does reduction and taper, learn what target behaviors are acceptable, maximum dose for antipsychotic medications, and the proper diagnosis for antipsychotic medication. Understand how to monitor for adverse affects, and learn acceptable use of sedative/hypnotic agents. Richard E. Corritore, PharmD, CCP, RPh, EPIC Administrator - Pharma-Care Inc.

2:45 to 3 p.m. Break

#### 3 to 4:15 p.m.

**EMERGENCY PREPAREDNESS FOR ASSISTED LIVING** This presentation will provide information on emergency preparedness and crisis management for assisted living.

J. David Weidner, MPH, REHS, MEP, CEM, Director, Emergency Preparedness - HCANJ

4:15 to 4:30 p.m. - Evaluations / Certificates Awarded

## Register Early ~ maximum seating of 50!

There has been no sponsorship received for this event



# TOP GUN SCHOOL for Assisted Living Nurses September 22, 23 & 24, 2014 COURSE GENERAL INFORMATION

#### — WEDNESDAY, SEPTEMBER 24, 2014 —

#### 8 a.m. - Registration & continental breakfast

#### 8:30 to 9:45 a.m.

THE CERTIFIED MEDICATION AIDE (CMA) PROGRAM This session will help you understand the NJDOH guidelines and what a CMA must know. Learn to properly delegate medication administration according to the law. Understand the principles of delegation and the requirements for oversight and observation of CMAs *TBA* 

#### 9:45 to 11 a.m.

THE PHARMACIST'S ROLE IN TRAINING THE CMA This segment will provide a detailed description of the Pharmacist's role in training PCAs for medication administration and the close relationships established between the RN, physician, CMA and pharmacy consultant. The program will also reinforce that the CMA must always report to the RN first.

Marie Migliore, RPh., CCP - Pharm-Assist, Inc.

#### 11 to 11:15 a.m. Break

#### 11:15 a.m. to 12:30 p.m.

WOUND CARE ASSESSMENT, PREVENTION AND DOCUMENTATION

This segment will present current information about wound care and define high rick

This segment will present current information about wound care and define high risk residents.

Jeanine Maguire, MPT, CWS, Corporate Clinical Specialist / Skin Integrity - Genesis HealthCare

#### 12:30 to 1 p.m. Complimentary lunch

#### 1 to 2:15 p.m.

#### FALLS MANAGEMENT AND PREVENTION STRATEGIES Examine

resident fall situations that assisted living nurses confront and often feel helpless to remedy. We will also cover best practices management and prevention to reduce the risk of falls in the elderly.

Jessica Fulmino, PT, MS, Clinical Specialist, Genesis HealthCare Balance and Falls Special Interest Group - Genesis HealthCare Corp, Inc.

#### 2:15 to 2:30 p.m. Break

#### 3 to 4 p.m.

QUALITY ASSURANCE AND IMPLEMENTING BEST PRACTICES This presentation will teach how to develop a meaningful quality improvement plan based on national and state benchmarks, root cause analysis and data collection. Master the secrets of establishing and managing effective performance improvement teams. Elisabeth Micich-Otero, MSN, RN-BCC, Quality Manger, LTC Division / Clinical Education - Christian Health Care Center

#### 4 to 4:15 p.m. - Evaluations / Certificates Awarded



Course location and directions: **HCANJ Executive Headquarters** 4 AAA Drive, Suite 203, Hamilton, NJ

Directions can be found at http://www.hcanj.org/files/2013/09/

ABOUT THE COURSE: This course was developed by Loretta Kaes, RN, BSN, BC, C-AL, LNHA, CALA, Director, Quality Improvement & Clinical Services at HCANJ. The objective of this course is to provide a fundamental foundation for nurses in the assisted living setting.

PAYMENT All registrations must be accompanied by payment in full either by check or money order made out to HCANJ, or by credit card. HCANJ accepts Visa, MasterCard and American Express. Registrations received without payment cannot be processed. Please make certain to print your information clearly on your registration form to avoid attendance certificate errors. Fillable forms are available so that you can type your registration.

**PROGRAM MATERIALS** Each registered individual must pick up their own program materials when signing in each day.

**CANCELLATIONS** HCANJ regrets that we are unable to offer refunds for cancelled registrations. We encourage individuals who cannot avoid cancellation to send a substitute.

**REGISTRATION SUBSTITUTIONS** If the originally registered individual is unable to attend, we encourage substitution from the same facility. Since neither badges nor program packets are transferable, individuals wishing to make a substitution should call HCANJ at 609-890-8700 or email the request to michelle@hcanj.org with the information for the new attendee so that new materials can be prepared in advance of the program.

#### **REGISTRATION INCLUDES**

- Student materials
- Breakfast & Lunch (Kosher available upon request)

**DRESS CODE** Attendees are encouraged to employ a business casual dress code. Bring a jacket or sweater to ensure your comfort in the event of temperature changes in the meeting room.

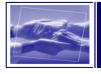
**CONTINUING EDUCATION & CONTACT HOURS -** This continuing nursing education activity was approved by the New Jersey State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Approval status does not imply endorsement by HCANJ, NJSNA or by ANCC of any commercial products discussed/displayed in conjunction with the educational activity.

The nurse planner & speakers have been cleared of conflict of interest for these education sessions.

All students will be required to sign a roster giving their license number daily. Upon request, this attendance roster will be sent to the licensure boards to verify individual hours earned. Evaluation forms will be collected at the end of each day. Certificate of Attendance will serve as the official attendance record for presentation to accrediting bodies. Nursing education certificates will be provided on site, only after attendance rosters are signed and evaluations are handed in.

## Register Early ~ maximum seating of 50!



# TOP GUN SCHOOL *for* Assisted Living Nurses September 22, 23 & 24, 2014 **REGISTRATION**

#### **YOU MAY REGISTER IN ONE OF FOUR WAYS:**

BY FAX: Fax your completed registration form along with your credit card information to: 609-584-1047

BY EMAIL: Email your completed form to michelle@hcanj.org

**BY MAIL**: Mail your completed registration form along with your check or credit card information to:

Health Care Association of New Jersey, 4 AAA Drive, Suite 203, Hamilton, NJ 08691

**ONLINE**: http://www.hcanj.org/tgal14

- If you have questions regarding the program, please call or e-mail Michelle Palko at 609-890-8700 or Michelle@hcanj.org
- HCANJ regrets that we are unable to offer refunds for cancelled registrations and no-shows. Registrant substitutions
  from the same facility are acceptable.

|  | PRINT ALL INFORMATION   |                              |                                  |           |
|--|---|------------------------------|----------------------------------|-----------|
| NAME   | TITLE   |                              |                                  |           |
| License #: RN                                | LPN   |                              |                                  |           |
| DAY 1 Mon., September 22, 2014 🖵             | \$150 HCANJ MEMBER INDIVIDUAL                                   | □\$250 NON-MEMBER INDIVIDUAL |                                  |           |
| DAY 2 Tues., September 23, 2014 🔲            | 50 HCANJ MEMBER INDIVIDUAL □\$250 NON-MEMBER INDIVIDUAL         |                              |                                  |           |
| DAY 3 Wed ., September 24, 2014   3          | 50 HCANJ MEMBER INDIVIDUAL □\$250 NON-MEMBER INDIVIDUAL         |                              |                                  |           |
|  | L SAVINGS: Register for the total  J MEMBER 3-DAY FEE □\$650 NO |                              |                                  |           |
| Facility Name                                | AddressSt   | reet address                 | City                             | State/Zip |
| Payment Method: ☐Check enclosed for          | or \$ □Charge my card for \$_                                   |                              | <sup>r</sup> Card □Visa          | □Amex     |
| Credit Card No*the CV2# is the three or four | CV2 #<br>digit additional black number on the front or back     | Cal                          | rd exp. date_<br>Example: 4786 4 | 11)       |
|  | ormation: To whom and where credi                               |                              |                                  | ,         |
| Cardholder Name:                             | Address:St  | reet address                 | City                             | State/Zip |
| Cardholder: E-mail                           | Cardholde   |                              |                                  |           |
| Contact                                      | information of individual responsible                           | e for registration:          |                                  |           |
| Name:  | Title:  |                              |                                  |           |
| E-mail:                                      | Phone:  |                              | Fax:                             |           |