



The Association for Home & Hospice Care of North Carolina Presents...
for your COP Compliance & Convenience!

Check it Off!

Get Your Aide Training in
Recognizing and Reporting Skin Changes Here!
With a Free Bonus Webinar!



484.80 –Home Health Aide Services Standard

(b) Content and Duration of Home Health Aide Classroom and Supervised Practical Training

(3) A home health aide training program must address each of the following subject areas:

(i) **Communication skills**, including the ability to read, write, and verbally report clinical information to patients, representatives, and caregivers, as well as to other HHA staff.

(xiii) **Recognizing and reporting changes in skin condition**

(4) The HHA must **maintain documentation** that demonstrates that the requirements of this standard have been met.

To help home health providers meet the new COP requirements above, we have developed a 2 Part Webinar Series for your aides on ***Recognizing and Reporting Skin Changes***. You'll get a year's subscription to the on-demand webinars, handouts and a certificate of completion for your aides for the aide supervisor to sign and place in the aide's personnel file. **As a bonus, if you order by June 30th**, you'll also get a year's free access to a webinar on ***Communication Skills for the Home Health Aide***, handouts and a certificate.

The webinars are taught by Sherry Thomas, BSN, MPH, Senior Executive Vice President, AHHC of NC. Sherry has over 37 years of experience in home health and is the recipient of numerous nursing and industry awards. She was a Johnston Scholar at the University of NC at Chapel Hill and is a member of Sigma Theta Tau the national honor society for nurses.

AHHC's Home Health Conditions of Participation Training for Aides Only \$150 for a year's subscription!

Registration Fee: Registration fees are based on one phone/webinar connection; multiple site participation for your agency will require a separate registration fee for each connection. Please note: No refunds will be processed once links have been accessed.

PLEASE PRINT

Contact Name: _____

Email Address: _____

- YES please sign me up for **\$150** to receive a year's subscription to AHHC's Home Health Conditions of Participation Training for Aides PLUS access to the Communication Skills for the Home Health Aide webinar!

Today's Date: _____

Amount Enclosed: **\$ 150**

Agency: _____

Agency Address: _____ Agency City, State Zip: _____

Phone: _____ Alternate Email: _____

PAYMENT



My check (payable to AHHC) is enclosed in the amount of \$ _____ Charge my:

Credit Card Number _____ Exp. Date _____

Name (as it appears on card) _____

Address (of cardholder) _____

Signature (required) _____

Registration must be received in writing and will not be accepted without payment.

Two Easy Ways to Register: **By Mail:** (If paying by check or credit card) mail registration form with total registration fees to: AHHC, 3101 Industrial Drive, Suite 204, Raleigh, N.C., 27609 **By Fax:** (If paying by credit card) fax a copy of the registration form with the appropriate credit card information and signature to 919.848.2355. Our fax lines are open 24 hours a day. Please contact at richardfowlkes@homeandhospicecare.org.