

 **NEW HOME CARE
CLINICIANS COURSE**

On-Demand “OASIS-D Accuracy” 4-Part Course

Member Pricing:
Primary Registrant \$199
Any Additional Registrant from the same agency \$150
Non-Members \$299

Program Description:

Time Commitment: Recording 1 (1:50:28); Recording 2 (1:40:53); Recording 3 (1:14:04); Recording 4 (1:24:25)

The application of OASIS (Outcome and Assessment Information Set) is one of the most complex and confusing challenges for both new and seasoned home health clinicians. As CMS continues to refine its approach to OASIS data collection, having a solid understanding on the basics of OASIS D coding is essential. This program will review the expectations from CMS, how to answer the many OASIS questions and offers practice scenarios to get “hands-on” experience using the OASIS tool for assessments. The training content is based on the OASIS D data set.

Program Objectives (At the completion of this session, participants will be able to...):

- Identify the recent changes and history of the data set.
- Review the importance and value of the OASIS D.
- Explain the reason for the use of the OASIS D.
- Describe how the OASIS data set is used
- Describe the major conventions of the OASIS D.
- Explain the implications of coding.
- Discuss the Response-Specific instructions for the OASIS D items.
- Apply knowledge of OASIS Items through engagement in practice coding.
- Identify the primary resources to advance understanding of OASIS items.

Presenter:

Charlotte Steniger, RN, MSN, COS-C., COQ-S, Home Health Consultant



Charlotte Steniger is a Home Health Care Consultant and has over 20 years of professional experience in the home health care industry as a nurse case manager and clinical educator. Ms. Steniger has worked directly with home health care agencies, assessing their compliance with state and federal regulations, and providing recommendations to improve clinical processes. She develops training and education on various topics relating to home health best practices and related regulation.



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Registration deadline:

Registration is ongoing.

Payment/Cancellation Policy:

Payment must be made upon purchase of the course. This “on-demand recording” registration may not be shared. Your registration covers the access of only **one log in** to the course. Handouts and related materials will be sent to you with your purchase of the on-demand recording of the course to the email address you provide.

Amount Enclosed: \$_____

Agency _____

Address: _____ Phone: _____

Attendee Name: _____ Email _____

PAYMENT METHOD

Check (payable to the Association)

VISA MasterCard American Express Discover

Cardholder's name (print) _____

Card Number _____/_____/_____/_____ Exp. Date ____ CVV/Security Code: _____

Cardholder's Address: _____

Telephone _____ Email: _____

Signature: _____

For help filling out the form please reach out Susan@homecarenj.org