



**Target Audience:**

Owners/Operators, Administrators, Nurse Leadership, Nurses, CNAs, Assisted Living Executive Directors, Managers, Caregivers.

**5.5 CEUs offered through NCIA**

# Abuse and Neglect

## A REGULATORY PERSPECTIVE

**Thursday, February 6, 2020**

**9:00 am – 4:00 pm**

Phoenix Airport Marriott  
1101 N 44th St | Phoenix, AZ 85008

**State and national leaders from ADHS, APS and National AHCA/NCAL will provide critical information to address and potentially reduce abuse and neglect incidents at your center or community.**

- CMS oversight of abuse and neglect
- Conducting thorough investigations and necessary documentation
- Bureau of Residential Facilities Licensing requirements for investigations
- Bureau of Long Term Care Licensing interpretation of CMS and State requirements
- Adult Protective Services definition of abuse, how it is substantiated, and overview of APS Registry



**SPEAKERS**

**Pamela Truscott, MSN, RN, DNS-CT, QCP**

AHCA/NCAL Senior Manager of Clinical & Regulatory Services, Washington DC

**Kay Huff, RN**

Director of Quality and Regulatory Services, Arizona Health Care Association

**Cindy Graham**

Health Care Compliance Manager, Residential Licensing, Arizona Department of Health Services

**Diane Eckles**

Bureau Chief, Division of Long Term Care, Arizona Department of Health Services

**Jennifer Kirchen**

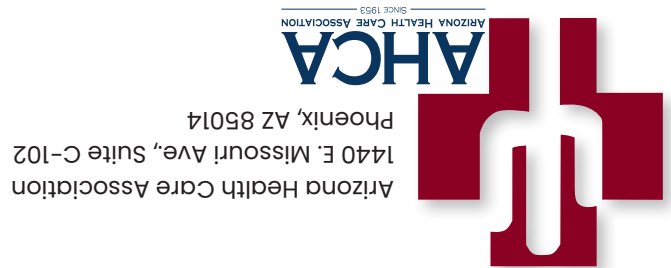
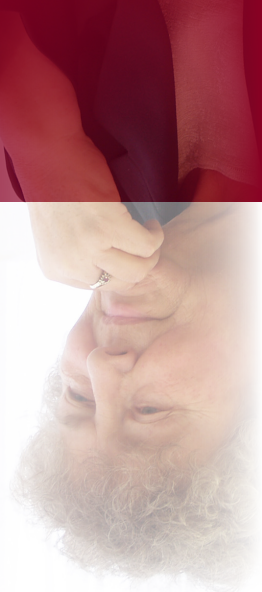
Deputy Assistant Director Aging and Adult Services, Adult Protective Services, Arizona Department of Economic Security

**QUESTIONS**

Please contact **Maria Molina**, AHCA Director of Education, [mmolina@azhca.org](mailto:mmolina@azhca.org) or 602-265-5331

# Abuse and Neglect: A REGULATORY PERSPECTIVE

Quality Forum | February 6, 2020



## Abuse and Neglect

A REGULATORY PERSPECTIVE

Lunch provided  
5.5 CEUs offered through NCIA

Thursday • February 6, 2020

**\$170 per AHCA Member • \$240 per Non AHCA Member**

Register online at [www.azhca.org](http://www.azhca.org) (under Events & Education, AHCA Quality Forums)

Register three online from the same facility and receive a **10% discount!**

Center: \_\_\_\_\_

Registrant's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Additional Registrant's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Payment Type:  Check  Visa  MC  AMX / Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

CC#: \_\_\_\_\_ Name on Card: \_\_\_\_\_

**Checks should be made payable to the Arizona Health Care Association. No refunds given.**

**Return your registration with payment to:**

Arizona Health Care Association, 1440 E. Missouri Avenue, Suite C-102, Phoenix, AZ 85014

PH: 602-265-5331 | FAX: 602-265-4401 | EMAIL: [mmolina@azhca.org](mailto:mmolina@azhca.org)