

Implementing New Jersey's Mandatory Universal Transfer Form

Sept. 13 – NJHA

Sept. 22 - South Jersey Healthcare Fitness Connection

Oct. 12 - Bergen Community College Technology Education Center

Oct. 18 – Hunterdon Medical Center

Co-provided by:

New Jersey Hospital Association, Health Care Association of New Jersey
LeadingAge New Jersey, Home Care Association of New Jersey

PROGRAM OBJECTIVES

From 2006 through 2009, the Universal Transfer Form (UTF) was designed, pilot tested, evaluated and refined by a task force of stakeholders. Included were physicians and nurses from care settings across the continuum, emergency department staff, the New Jersey Department of Health and Senior Services, the New Jersey Hospital Association, the Health Care Association of New Jersey, LeadingAgeNJ (formerly NJAHS), the Home Care Association of New Jersey, Healthcare Quality Strategies, Inc. and Rutgers University Center for State Health Policy.

Now, the final regulations that mandate implementation of the UTF have been adopted with an effective date of Nov. 2011. This program, offered at four locations in both the morning and afternoon, is designed to assist the 1,900 healthcare facilities and programs licensed by the DHSS that will be required to use this form for patients who are transferred between settings. These include general and specialty hospitals, nursing homes, assisted living communities, adult and pediatric medical day care centers, home health and hospice agencies, ambulatory care centers and all other DHSS-licensed providers.

Participants in this program will be able to:

- Understand how the UTF will ensure more accurate information is conveyed between healthcare facilities and programs
- Complete the UTF accurately
- Recognize the importance of moving toward electronic implementation of the UTF

WHO SHOULD ATTEND

All clinicians involved in completing transfer documentation for patients in all settings; administrators; and department heads.

(OVER)



REGISTRATION INFORMATION

Fees: \$50 ea.
Includes refreshments and materials.

- **Payment by credit card or check is required along with this registration form in order to be registered. Faxed copies of check will not be accepted.**

- Registrations will be accepted by FAX at 609-275-4271 **ONLY IF ACCOMPANIED BY** credit card information (MasterCard, VISA or American Express).
- Make checks payable to: HRET of NJ
- Mail to: Educational Services
HRET of NJ
P.O. Box 828691
Philadelphia, PA 19182-8691

If your check is being processed you may use a credit card to *hold* your registration. Please write "HOLD ONLY" by the credit card information. **Credit card will be charged if check is not received by the date of the conference.**

I AGREE TO THESE TERMS.

- Cancellations received seven business days before the program will receive a refund minus a \$15 per person service fee. Cancellations received after that date will not be eligible for a refund.
- Registrants unable to attend may send an alternate.
- **No confirmation will be sent.**
- For brochures or a calendar of upcoming seminars go to <http://www.njha.com/index.aspx>.

FOR MORE INFORMATION, OR IF YOU HAVE A DISABILITY AND NEED A SPECIAL ACCOMMODATION, PLEASE CALL 609-275-4180 or 4181.

CONTINUING EDUCATION CREDITS

HRET-NJHA is an approved provider of continuing education by the New Jersey State Nurses Association, an accredited approver by the American Nurses Credentialing Center's COA. P#131-5/11-14.

This activity is approved for two contact hours.

There is no commercial support for this activity. Disclosure information: Full disclosure will be provided at the educational activity.

Accredited status does not imply endorsement by the provider or American Nurses Credentialing Center's COA of any commercial products displayed in conjunction with an activity.

HRET is an approved provider of LNHA continuing education credits in accordance with N.J.A.C. 8:34-7-3(a). This program has been approved for two credits.

PROGRAM SCHEDULE

9:30/12:30 *Registration/Refreshments*

10:00/1:00 **Welcome/Overview**

Eugene L. Brenycz, JD, MPA
Regulatory Officer 3
Division of Health Facilities
Evaluation & Licensing
Office of Certificate of Need and
Healthcare Facility Licensure
DHSS

10:30/1:30 **A Walk Through the UTF – Case Examples**

11:00/2:00 **Moving Toward Electronic Implementation**
Mike Relli
Vice President
Business Development
IGI Health

11:30/2:30 **Questions/Answers/Evaluation**

12:00/3:00 *Adjournment*

**The Universal Transfer Form:
From Idea to Reality**
Alison Gibson, RN
Director
Office of Health Facilities
Assessment & Survey
Division of Health Facilities
Evaluation & Licensing
DHSS

Directions
NJHA
<http://www.njha.com/directions.aspx>
Hunterdon
http://www.hunterdonhealthcare.org/directions/hmc_directions.asp
South Jersey Fitness Connection
<http://www.sjhealthcare.net/content/directions>
Bergen Community College
<http://www.bergen.edu/pages1/Pages/1690.aspx>

Visit www.HRET-Register.com to register online with a credit card.

REGISTRATION (Please Type or Print Clearly)

Seminar #1156 (UTF) \$50

Name (as it should appear on badge) _____
Title _____
Phone _____ Fax _____
E-mail address _____

Hospital/Firm _____
Street _____
City _____ State _____ Zip _____
Amount: \$ _____

Check the location and session you wish to attend:
 Sept. 13 – NJHA **AM** **PM**
 Sept. 22 – South Jersey **AM** **PM**
 Oct. 12 – Bergen **AM** **PM**
 Oct. 18 - Hunterdon **AM** **PM**

PAYMENT METHOD
Check MasterCard VISA Amex
Card # _____ Expiration Date _____
Print Name (as it appears on card) _____
Signature _____