

DOS-W

NHCA/NALA

NEBRASKA HEALTH CARE ASSOCIATION
NEBRASKA ASSISTED LIVING ASSOCIATION
3900 NW 12th St Ste 100
Lincoln NE 68521-3037

DIVERSIFICATION OF SERVICES

**MARCH 9-10, 2010
LINCOLN, NEBRASKA**

**Vetter Learning Center, 3900 Northwest 12th Street, Suite 100
Phone: (402) 435-3551**



NHCA/NALA Continuing Education

PROGRAM CONTENT AND OBJECTIVES

Have you been questioning what other services your nursing facility or assisted living facility can develop to provide an additional revenue stream? Have you identified services within your community that are not being provided and wondered where you might begin to evaluate if you should provide those services? Have you been impressed with other successful diversified facilities and asked yourself how they conducted their strategic planning? This program will provide attendees with a comprehensive tool box for diversification that reviews strategic planning, financial development, market studies, and multiple service lines within the continuum of care.

At the completion of the program, participants will be able to:

1. Review appropriate business practice for strategic planning and developing a Performa, business plan, and budget;
2. Discuss market needs and assess new business line development.
3. Identify the regulations, requirements for set-up, reimbursement, and policies that relate to diversifying in the following service areas: adult day, respite care, chore, transportation, Medicare Part B, special care unit, home health, and hospice.
4. Develop an overall plan for implementation of services within the health care continuum.

AUDIENCE

Administrators, Nurses, Social Services, and Activities in nursing facilities and assisted living facilities

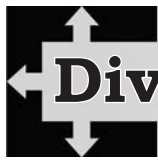
SCHEDULE

DAY 1, MARCH 9:

- 9:30 am - 10:00 am Registration
- 10:00 am - 12:00 noon Strategic Planning and Development for a Business Plan, Performa, and Budget
- 12:00 noon - 12:45 pm Lunch (provided)
- 12:45 pm - 1:45 pm Strategic Planning and Development for a Business Plan, Performa, and Budget (continued)
- 1:45 pm - 2:45 pm Market Evaluation
- 2:45 pm - 3:00 pm Break
- 3:00 pm - 4:00 pm Adult Day Services
- 4:00 pm - 5:00 pm Respite Services

DAY 2, MARCH 10:

- 8:00 am - 9:00 am Chore Services
- 9:00 am - 10:00 am Transportation Services
- 10:00 am - 10:15 am Break
- 10:15 am - 11:15 am Medicare Part B Services
- 11:15 am - 12:15 pm Special Care Units
- 12:15 pm - 1:00 pm Lunch (provided)
- 1:00 pm - 2:00 pm Home Health Services
- 2:00 pm - 3:00 pm Hospice Services



Diversification of Services

CONTINUING EDUCATION CREDIT

This education program meets the continuing competency requirements of 12 hours for the renewal/reinstatement of a Nebraska Nursing Home Administrator's license as granted by the Nebraska Board of Nursing Home Administrators. This program is appropriate for the educational requirement for assisted living administrators. This program meets the criteria of a peer approved continuing education program of 12 hours for nurses. This program meets the criteria of an approved continuing education program for social work. This program is appropriate continuing education for activity coordinators.

Participants must stay in the program the entire time to receive full credit.

SPEAKERS

Joyce Ebmeier, Vice President, Strategic Planning, Tabitha Health Care, Lincoln NE

Carol S. Ernst, M.A., Executive Director, Eastmont Towers, Lincoln NE

Geri Hepp, M.A., Memory Care Program Manager, Madonna Rehabilitation Hospital, Lincoln NE

Shari Terry, B.S.N., N.H.A., Operations Coordinator, Vetter Health Services, Omaha NE

Tony Fulton, CEO, Guardian Angels Homecare, Lincoln NE

Vicki Harding, Manager, Transport Plus, Lincoln NE

Cindy Klein, R.N., NHA, Vice President of Operations, Hillcrest Health Systems, Bellevue NE

Helen Crunk, R.N., Administrator, Victoria Gardens, Bellevue NE

Curtis A. Klein, Executive Director, HoriSun Hospice, Lincoln NE

Pat Mehmken, R.N., M.S.N., Administrator of Home Health, Tabitha Health Care, Lincoln NE

REGISTRATION INFORMATION

PRE-REGISTRATION IS ENCOURAGED. There will be a \$10.00 PER PERSON PER DAY ADDITIONAL CHARGE for registrations not received in the NHCA/NALA office by the close of business on March 3 for the March 9-10 program. Registration at the door will be accepted only if space permits.

CANCELLATIONS—There will be NO REFUNDS for cancellations received in the NHCA/NALA office after March 4 for the March 9-10 program except in the case of a death in the registrant's immediate family—mother, father, husband, wife, brother, sister, or child.

REFUNDS—Registration fees will be credited/refunded MINUS A \$15 PER PERSON PER DAY SERVICE CHARGE for cancellations received in the NHCA/NALA office by the close of business on or before March 4 for the March 9-10 program.

ALTERNATE REGISTRANT—If a registrant must cancel, an alternate registrant is always accepted to replace the cancelled registrant but only to the entire two-day program. This applies to facility members and facility non-members.

All Personal Associate Members, Student Members, Business Associate Members, NHPCP members, LPNAN members, and non-members—fees must be paid in advance and must accompany the registration form.

Registration includes lunch and handout materials. If you are an Administrator, Director, or Manager, you must register as an Administrator.

TAPING - CELLULAR PHONES - PAGERS

Material presented at this education program is the property of the speakers or Nebraska Health Care Association/Nebraska Assisted Living Association. Therefore, taping of the program is not allowed. NHCA/NALA also asks that all cellular phones and pagers be turned off during education programs.

TAX DEDUCTION FOR EDUCATION EXPENSE: Treasury Regulation §1.162-5 Coughlin vs. Commissioner, 203 F.2d 307, permits an income tax deduction for education expenses (registration fees and cost of travel, meals and lodging) undertaken to: (1) maintain or improve skills required in one's employment or other trade or business or (2) meet express requirements of an employer or a law imposed as a condition to retention of employment, job status, or rate of compensation.

Please bring a sweater or jacket to ensure your comfort at the program.



NHCA/NALA Continuing Education

A letter of confirmation will be sent and is necessary for admission to the training program!

The letter of confirmation will contain lodging information.

Registration Fee for 2-Day Program:

	Members*	Non-members
Administrator.....	\$228.....	\$456
Staff	\$160.....	\$320
NHPCP/LPNAN Member	\$160	
NHCA Student Member	\$114	

*Member rates apply to NHCA, NALA, LPNAN, and NHPCP members.

REGISTRATION FORM

Diversification of Services — March 9-10, 2010

Registrations accepted by mail, fax, phone, or online!

Mail: NHCA, 3900 NW 12th St Ste 100, Lincoln NE 68521-3037

Fax: (402) 475-6289 Phone: (402) 435-3551 Online: www.nehca.org

Facility: _____ Phone: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Membership Status: Member Non-Member
(For NHCA Office Use Only: ACCT ID _____)

Billing Information: Check Enclosed Cash
 Credit Card Bill

If you have a disability that requires special needs, please attach a written description of your needs.

If you wish a vegetarian meal or have other dietary restrictions, make a notation by your name.

Cardholder's Name (PRINT): _____
Credit Card #: _____
Expiration Date: _____
Cardholder's Billing Address, City, State, Zip: _____
Signature: _____
Your signature on the line above will authorize this transaction. ↑

Check for Administrator Hours	Check Nursing Facility or Assisted Living Registration		Please Print or Type Clearly!
	NF	AL	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name _____ Title _____ Amount _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name _____ Title _____ Amount _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name _____ Title _____ Amount _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name _____ Title _____ Amount _____

Total Amount: _____