

CNU-W

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

CHARGE NURSE TRAINING



August 10 and 11, 2010
Lincoln, Nebraska

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

*A training program for the
Nebraska Health Care Association
offered through the
Nebraska Health Care
Learning Center*

NHC-LC



The Nebraska Health Care Learning Center (NHC-LC)

An Affiliate of the Nebraska Health Care Association

Serving Those Who Serve

CHARGE NURSE TRAINING

OBJECTIVES

Upon completion of this training, participants will be able to:

1. Identify the impact of group process on group success and productivity.
2. Identify roles of a nurse/manager in nursing facilities.
3. Discuss situational leadership and four components: directing, coaching, supporting, and delegating.
4. Understand the effects of co-dependency in the work environment.
5. Identify the components of problem solving and implement the process when appropriate.
6. Conduct and participate in an effective meeting.
7. Utilize effective communication techniques in management and the leadership process.

AUDIENCE

This training is appropriate for charge nurses—R.N.s and LPNs in **nursing facilities**.

SCHEDULE: DAY 1

8:30 am - 9:00 am Registration
9:00 am - 10:15 am Dynamics of Group
10:15 am - 10:30 am Break
10:30 am - 12:00 noon ... Dynamics of Group
12:00 noon - 1:00 pm Lunch (provided)
1:00 pm - 2:30 pm Roles of Leader/Manager
2:30 pm - 2:45 pm Break
2:45 pm - 3:30 pm Roles of Leader/Manager
3:30 pm - 4:30 pm Managing Relationships—
Recognizing Co-dependency

SCHEDULE: DAY 2

8:00 am - 9:15 am Managing Relationships—
Recognizing Co-dependency
9:15 am - 9:30 am Break
9:30 am - 11:30 am..... Problem Solving
11:30 am - 12:30 pm..... Lunch (provided)
12:30 pm - 1:30 pm Problem Solving
1:30 pm - 2:00 pm Participating in Effective Meetings
2:00 pm - 2:15 pm Break
2:15 pm - 3:30 pm Communication Processes
3:30 pm..... Adjourn

FACULTY

Jan Vrtiska, R.N., B.S.

Jan Vrtiska has been a nurse consultant, staff nurse, administrator, nursing school instructor, and director of nursing.

CONTINUING EDUCATION CREDIT

Participants must attend both days in order to obtain credit. This training meets the requirements for 12 hours of continuing education for license renewal of nurses as established by the Licensure Unit, Health Licensure and Investigation Section, Division of Public Health, Nebraska Department of Health and Human Services.

COLLEGE CREDIT

Training may be taken as credit or non-credit. The Nebraska Health Care Learning Center will award 1.2 hours of college credit upon successful completion of 12 hours of classroom instruction. See the Nebraska Health Care Learning Center Catalog (Date published: May 2010) for credit requirements. View and/or print this catalog from the Nebraska Health Care Association Web site.

NHCA Web site: www.nehca.org/nhclc

TAPING—CELLULAR PHONES—PAGERS

Material presented at this training is the property of the speaker or Nebraska Health Care Association. Therefore, taping of the training is not allowed. NHCA also asks that all cellular phones and pagers be turned off during education training sessions.

TAX DEDUCTION FOR EDUCATION EXPENSES

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.

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

Casual dress for both days.

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



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NEBRASKA HEALTH CARE LEARNING CENTER POLICIES

The Nebraska Health Care Learning Center policies regarding admission, withdrawal, attendance, grades, transcripts, and refunds are located in the Nebraska Health Care Learning Center Catalog (Date published: May 2010). View and/or print this catalog from the Nebraska Health Care Association Web site.
NHCA Web site: www.nehca.org/nhclc

REGISTRATION INFORMATION

Online Registration is Available!

www.nehca.org

WRITTEN PRE-REGISTRATION IS REQUIRED. Register by mail, fax, or online. No phone registrations will be accepted. Payment for tuition and fees must be included with the registration/enrollment form.

REFUND POLICIES

Students who withdraw from courses may receive a prorated tuition refund. Refunds shall be mailed within 30 days of official request. If the official request occurs within 72 hours of registration/enrollment, a full refund is appropriate. The request must be in writing and be postmarked within 72 hours of registration/enrollment. If official request occurs after 72 hours of registration/enrollment but before classes have begun, a \$150 registration fee is NOT refundable and all remaining tuition and fees will be refunded. After classes have begun, a \$150 registration fee is NOT refundable and remaining tuition and fees will be refunded as follows:

- Day 1—50% refund of tuition and fees over \$150
- Day 2—25% refund of tuition and fees over \$150
- Day 3—no refund of tuition and fees

After classes have begun, costs associated with course materials are nonrefundable.

ABSENTEE/MAKE-UP POLICY

In order to receive credit, participants must attend all two days of the training. If a day is missed, it must be made up by attending that day the next time the training is offered. It is the responsibility of the participant to make registration arrangements for make-up days. There will be a \$45 charge for each make-up day.



If a registrant has a disability that requires special needs, attach a written description of the needs to the registration form.

TUITION AND FEES for the 2-Day Training Program

Members of NHCA, and LPNAN—For 2 Days:

Tuition (member): \$62.40
Fees (member):..... \$87.60
**Total Member Tuition and Fees
per person \$150**
Make-up Day, Member \$45.00 per day

Non-members—For 2 Days:

Tuition (non-member):... \$62.40
Fees (non-member): ... \$237.60
**Total Non-member Tuition and Fees
per person \$300**
Make-up Day, Non-member \$45.00 per day

⇒ **Payment for tuition and fees must be included with the registration/enrollment form.**

⇒ **The tuition and fees payment includes lunch, breaks, and handouts for two days.**

If a registrant wishes a vegetarian meal or has other dietary restrictions, make a notation on the registration form.

⇒ **Rates apply whether or not the participant elects college credit.**

⇒ **Refer to the Absentee/Make-up Policy.**

HOTEL ROOM BLOCKS

A block of sleeping rooms is available for the nights of August 9 and 10, 2010, at:

Country Inn & Suites

5353 North 27th Street, Lincoln, Nebraska
Phone: (402) 476-5353

Rate: \$74 per night • Release Date: July 15, 2010

Sleep Inn

3400 Northwest 12th Street, Lincoln, Nebraska
Phone: (402) 475-1550

Rate: \$55 per night/single • Release Date: July 15, 2010

Hampton Inn

1301 West Bond Circle, Lincoln, Nebraska
Phone: (402) 474-2080

Rate: \$70 per night/single • Release date: July 15, 2010

Staybridge Suites

2701 Fletcher Avenue, Lincoln, Nebraska
Phone: 402-438-7829

Rate: \$70 per night for a studio suite
Release date: July 15, 2010



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Nebraska Health Care Learning Center

Registration/Enrollment Form — Charge Nurse Training

Date: August 10 and 11, 2010 Location: Lincoln, Nebraska

Payment for tuition and fees must be included with this registration/enrollment form. Make a copy of this form for your records.

To register/enroll by mail: Complete this registration/enrollment form, include payment (use any of the payment methods listed below), and mail to: Nebraska Health Care Learning Center, 3900 NW 12th St Ste 100, Lincoln NE 68521-3037.

To register/enroll by fax: You must pay by credit card in order to register/enroll by fax. Complete this registration/enrollment form, check "Credit Card" as payment method, complete credit card information, and fax the completed form to (402) 475-6289.

A student's Social Security number is required as a condition of enrollment. A student's Social Security number constitutes an "educational record" under the Federal Educational Rights and Privacy Act (FERPA). That information will be disclosed only with the consent of the student or in those very limited circumstances when consent is not required by FERPA.

PLEASE PRINT

Social Security Number: _____
 Student Name (Last): _____ (First): _____ (MI): _____
 Home Address: _____
 City: _____ State: _____ Zip: _____
 County: _____ Phone (Day): _____ (Evening): _____
 E-mail Address: _____

Birth Date: ____/____/____ Gender: M F

Race (used for statistical purposes only):

- Asian/Pacific Island
- Black/African American
- Hispanic/Latino
- Native American
- White/Non-Hispanic
- Other

Veteran Status or Dependant Using Military Benefits: Yes No

Resident Status: Resident of Nebraska Non-resident of Nebraska

Course Number: **115**

Course Title: **Charge Nurse Training**

Credit: **1.2 Quarter Credits**

Tuition and Fees: Member—\$150 Non-member—\$300

Make-Up Day(s) — \$45/Day — Circle Day(s): 1 2

If paying "Member" tuition and fees through a facility membership, provide facility name and city:

Facility Name: _____ City: _____

Check One Box (For Credit or Not For Credit):

- For Credit (If requesting credit hours, must have high school transcript or equivalent on file with the Learning Center)
- Not For Credit

**Payment must be included.
We are unable to bill.**

Billing Information: Check Cash Credit Card Money Order

If payment is by credit card, complete the credit card information in this box: ↓

Make checks and money orders payable to:

Nebraska Health Care Learning Center
 3900 Northwest 12th Street, Suite 100
 Lincoln, Nebraska 68521-3037
 Phone: (402) 435-3551
 Fax: (402) 475-6289

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

Submission of this form indicates that I understand the following: My registration is complete and that I am accountable for the tuition and fees and subject to a grade in the courses listed. Should I officially drop, withdraw, or cancel, any refund in tuition will be determined by the date I submit my request to the Learning Center. Failure to attend does not constitute an official drop/withdrawal. The personal information is correct as shown; changes in the personal information must include the appropriate documentation. Students enrolling in courses through the Nebraska Health Care Learning Center consent to being photographed and videotaped during educational sessions for the possible inclusion in educational materials published by the Learning Center, NHCF, NHCA, and NALA. It is the policy of the Nebraska Health Care Learning Center to provide equal opportunity and nondiscrimination in all admission, attendance, and employment matters to all persons without regard to race, color, gender, religion, national origin, or disability. Inquiries concerning the Nebraska Health Care Learning Center policies on equal opportunity and nondiscrimination should be directed to the Director of LTCWIN, 3900 Northwest 12th Street, Suite 100, Lincoln, Nebraska 68521, Phone: (402) 435-3551, Fax: (402) 475-6289, or E-mail: septembers@nehca.org.

Signature: _____ Date: _____