

Education access

IHCA
ILLINOIS HEALTH CARE ASSOCIATIONS

ICAL
ILLINOIS CENTER FOR ASSISTED LIVING

The Center
for Developmental
Disabilities Advocacy and
Community Supports



Skill Building for the LTC Director of Nursing Elevate your nurse leadership in the long term care setting!

This 8-week webinar series runs August-September 2022 and focuses on skill building for serving effectively as the Director of Nursing with emphasis on effective leadership and staff engagement, nursing operations and systems of care for common conditions treated in the LTC setting.

Discussion will include:

- Survey readiness & avoiding frequently cited deficiencies
- HR management
- Staff training/competency
- Risk management
- QAPI activities targeting QM areas
- Fundamentals of reimbursement
- MDS oversight
- Promoting 5-Star quality

What to Expect: Growth in skills and insight for serving effectively as the DON or in other nurse leadership roles.

Target Audience: Nurse leaders including new or experienced DONs, ADONs, charge nurses, unit managers, staff interested in serving in a permanent or interim DON role, Administrators, Corporate Staff.

Sessions

Sessions held weekly on Wednesday at 1:30 p.m. Central

Aug. 3, 2022 — *A Day in the Life of a DON*

Aug. 10, 2022 — *Risk Management*

Aug. 17, 2022 — *QAPI*

Aug. 24, 2022 — *HR Management*

Aug. 31, 2022 — *Survey Readiness*

Sept. 7, 2022 — *MDS and Medicare Essentials*

Sept. 14, 2022 — *Essential Resources for the DON*

Sept. 21, 2022 — *Leadership and Management*

Speakers

Proactive Clinical Education Team

Janine Lehman, RN, LNC, RAC-CT, Director of Legal Nurse Consulting

Shelly Maffia, MSN, MBA, RN, LNHA, QCP, CHC, Director of Regulatory Services

Elisha Wilkes, RN, GERO-BC, RAC-CT, DNS-CT, Clinical Consultant



Dynamic DON Webinar Series

Week 8: Leadership & Management

September 21, 2022

1:30 p.m.

Session Overview

This session will review how the qualities of leadership and management and how they compare. It will also cover different leadership styles and the application of leadership principles, as well as time and workload management.

At the conclusion of this session the participants should be able to:

- Understand the skills necessary to be an effective leader and manager
- Describe leadership styles
- Apply leadership principles to effectively lead and manage the nursing team
- Implement strategies for time and workload management including effective planning and delegation



Speakers

Shelly Maffia, MSN, MBA, RN, LNHA, QCP, CHC | *Director of Regulatory Services*

Continuing Education

Illinois nursing home administrators, social workers, physical therapists/physical therapy assistants and licensed nurses will earn 1 clock hours of continuing education for participating in this session. The Illinois Health Care Association is approved as a sponsor of continuing education for nursing home administrators, social workers, physical therapists/physical therapy assistants and licensed nurses by the Illinois Department of Financial and Professional Regulation.

This session has also been submitted for NAB approval.

Dynamic DON Webinar Series
Week 8: Leadership & Management — September 21, 2022

| Participant Name | Email Address |
|------------------|---------------|
| | |
| | |
| | |
| | |

Contact Person: _____

Facility: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

IHCA Member LTCNA Member

Payment:

- ___ Member of IHCA or LTCNA.....\$75 each log in*
- ___ Non-Member.....\$150 each log in*
- ___ Multiple participants at one log in CE fee.....\$10 each additional participant

***NOTE: Fee is for one computer and one phone line only. Additional fees are required for multiple log ins. To register multiple participants for one log in, fill out this form and return to IHCA. This option is not available via online registration.**

Grand Total _____

Check enclosed **OR** Charge to: Visa MasterCard American Express Discover

Card Number _____ Expiration Date: _____

Security Code: _____ (3 digits REQUIRED) Signature: _____

Name on the credit card: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip: _____

Return with payment to:
Illinois Health Care Association
1029 S. Fourth Street
Springfield, IL 62703
Fax: 217.528.0452

OR

[Click here to register online](#)

| AMOUNT | CK#/ CC | MEMBER STATUS | DATE |
|--------|---------|---------------|------|
| | | | |