

PURPOSE & OBJECTIVES

- Identify Mo Dept. of Health & Senior Services (DHSS) requirements and regulations for the Nursing Assistant Training.
- Develop skills and principles of adult education and counseling for adult learning.
- Utilize appropriate testing methods.
- Determine appropriate curriculum.
- List requirements of examination and certification process.
- Increase stand up skills; and
- Share experiences and ideas with other RN Instructors to increase effectiveness in training.
- Utilize appropriate testing methods;and
- Sign an agreement with the State of Missouri to become a State Examiner

INSTRUCTOR

Shellie Goodin, RN has practiced nursing since 1994. She graduated from the University of Missouri Columbia and has worked in the areas of long term care, rehabilitation, surgical, dialysis, and obstetrics. She is a full-time instructor for Nichols Career Center in Jefferson City, teaching in both the LPN and Health Occupations program for the last 16 years. Currently, she is continuing her education in a MSN Program for Nursing Education. She lives in Jefferson City with her husband and 16 year old twins.

CNA INSTRUCTOR/ EXAMINER TEACHING METHODS

Satisfies the Department of Health & Senior Services Requirements to become a qualified Instructor of Nurse Assistants

June 14, 2017

Co - Sponsored by

MANHA
*Missouri Assoc. of Nursing
Home Administrators*

&

MHCA
Missouri Health Care Assoc.

Phone: 573-634-5345
Fax: 573-634-8590
www.mlnha.org

DATES

June 14, 2017

**Mo Health Care Association
236 Metro Drive
Jefferson City, MO 65109**

AGENDA

8:15 - 8:30 AM - REGISTRATION

8:30 AM - 4:30 PM WORKSHOP

(one hour for lunch on your own)

FEES

Instructor/Examiner Workshop...\$125.00

No Personal Checks

REFUNDS: You may cancel your registration up to 1 week prior to the workshop and receive a full refund or credit. If you cancel less than 1 week prior to workshop, you may send a substitute or transfer your registration to the next workshop or to one within 6 months. Refunds/credits will not be made if registrant fails to attend without prior notification.

CANCELLATION: We reserve the right to cancel the program if insufficient enrollment occurs. You will be notified prior to the seminar date and a full refund will be sent to you.

COURSE MATERIALS

Attendees must bring the revised Nurse Assistant in a Long-term Care Facility Instructor Manual to the workshop. Order from Assessment Resource Center, 2800 Maguire Blvd., Columbia, Mo 65201. Phone (800) 366-8232 Fax: (573)882-8937. website: www.arc.missouri.edu then order form under Health Care Materials

TO QUALIFY

To qualify to become a CNA instructor, you must have been an RN for two years and worked at a minimum one year in a LTC Facility in the last five years. Then submit a resume and a copy of your current R.N. license renewal card to the Health Education Unit, Dept. of Health & Senior Services, PO Box 570, Jefferson City, MO 65102. For questions regarding qualification call: DHSS, Health Education Unit at 573-522-6203. Resumes may be faxed to: 573-526-7656

Certificates will not be issued without a copy of the letter of approval from DHSS.

Missouri licensed RN instructors may act as clinical supervisors without taking training beyond this course!

Confirmation with map/directions and hotel information will be faxed or e-mailed to you. GPS directions may not be accurate.

On-line Training Opportunities

MANHA is an online education provider. The CNA Instructor/Examiner workshop and the Student courses are now available online. You can go to www.mlnha.org and click on Online Training Programs - click on view programs for more information.

CNA INSTRUCTOR REGISTRATION FORM

Name _____ Daytime Phone: _____

I am registering for the course on (date) _____ RN License # _____ SS# _____

Home Address _____

Facility Name _____ Facility Phone: _____ Fax: _____

Facility Address: _____ City/State/Zip _____

Enclosed Please Find \$ _____ Method of Payment (circle): Check VISA MC Discover

Card Number _____ Expiration Date _____

Name on Card _____ Address on Card _____ 3 Digit Security # _____

COMPLETE AND RETURN ALONG WITH APPROVAL LETTER AND PAYMENT TO: MANHA, 4100 COUNTRY CLUB DRIVE, JEFFERSON CITY, MO 65109 OR FAX: 573-634-8590