

Criteria for Single Offering Course Approval

The single offering application requesting Board approval of the continuing education program and hours must be sent to the Board of Nursing Home Administrators thirty (30) days in advance of the presentation via one of the following options:

1. Made payable online via electronic check or credit card at <https://health.mo.gov/about/online-payment.php>. Once electronic payment has been made and you received confirmation, email single offering application and requested documents to BNHA@health.mo.gov or via fax to (573) 526-4314.
2. Made payable in a check or money order to Board of Nursing Home Administrators. Check or money order along with the single offering application and requested documents are to be mailed to Board of Nursing Home Administrators, ATTN: FEE RECEIPTS, PO Box 570, Jefferson City, MO 65102-0570

If the single offering application and fee is submitted less than thirty (30) days in advance of the presentation, you need to pay the nonrefundable late fee of \$50.00 in addition to the fee of \$15.00 per requested clock hour.

Applications are reviewed using the following criteria:

1. The sponsoring agency and its role must be clearly identified in the information material. (If this is a "first time" application from your agency, the organization's mission statement/goals must be included.)
2. The sponsoring agency and its role must be clearly identified in the information material.
3. Offerings dealing with long term care administration should be planned in consultation with at least one licensed administrator.
4. A detailed program outline including the purpose and the content objectives must be included. Time allotted to each item in the outline must also be included.
5. The offering must be relevant to the educational needs of the participant and in the area of long term care administration as described in 19 CSR 73-2.031(2). For a detailed outline of expected content areas, please see attached "Long Term Care Core of Knowledge."
6. The program content must be adaptable and transferable to any long term care facility setting.
7. Methods for standardized content evaluation are described. See attached sample form.
8. Systematic method for recording and maintaining attendance. See attached sample form.

Sample Evaluation Form

Sponsoring Agency: _____

Course Title: _____

Date: _____

Location: _____

Time: _____

Program Approval Number: _____

This information is requested to monitor the instructors, educational materials, and class sites. Please write one of the following code numbers in the box for each item and include your comments. Your assistance is appreciated.

- Codes:
- | | |
|-------------------|--|
| 1. EXCELLENT - | as good as I've ever encountered |
| 2. GOOD - | meeting high standards, but not the best |
| 3. SATISFACTORY - | acceptable, but not outstanding |
| 4. POOR - | having at least one serious deficiency |
| 5. TERRIBLE - | as bad as I've ever encountered |

- ___1. Did the seminar achieve its stated learning objectives?
- ___2. How do you rate the Instructor's presentation of the materials?
- ___3. How do you rate the way the instructor was able to relate his/her expertise to the problems of long-term care administration?
- ___4. How do you rate the usefulness of the knowledge/skills you acquired here?
- ___5. How do you rate the classroom facilities as they affected your learning?
- ___6. Taking everything into account (including things possibly not listed above), how do you rate the relative value of this seminar?
- ___7. Do you have any general comments, criticisms, suggestions for improvements, recommendations for future seminar topics, questions, etc.?

Please note that when submitting the required documentation to the Board Office that only a summative evaluation is required. Do not send copies of individual evaluations.

Long Term Care Core of Knowledge

Patient Care (PC) Hours:

A. Nursing and Physician Services:

1. Restorative nursing;
2. Rehabilitation;
3. Definition, concept and procedures of nursing;
4. Skin and wound care;
5. Infection control procedures;
6. Drug administration and drug effects;
7. Disease recognition and process;
8. Quality Assurance;
9. Physician's role in the facility; and
10. Physician/resident relationships;

B. Social Services:

1. Resident rights;
2. Living wills and advance directives;
3. Social, emotional, religions and financial needs of the resident;
4. Family counsel and consultation;
5. Grieving process;
6. Death and dying;
7. Communication with the resident and;
8. Ombudsman program;

C. Food Services:

1. Proper nutrition;
2. Therapeutic diets; and
3. Resident satisfaction;

D. Social and Therapeutic Recreational Activities:

1. Needs of the resident;
2. Community resources;
3. Rehabilitation services;
4. Volunteers and auxiliaries; and
5. Chemical dependency of the resident;

E. Medical Recordkeeping:

1. Medical Records system;
2. Appropriate charting and documentation; and
3. Evaluation and revision of care plans;

F. Pharmaceutical Services:

1. Proper drug handling and control;
2. Proper drug dispensing; and
3. Drug interactions;

Administrative (A) Hours:

G. Personnel Management:

1. Maintaining a positive atmosphere;
2. Grievance procedures;
3. Effective communication;
4. Evaluation procedures;
5. Recruitment of staff;
6. Interviewing candidates;
7. Selecting future employees;
8. Staff development and training;
9. Personnel policies and procedures;
10. Health and safety;
11. Departmental organization and management;
12. Professional ethics and conduct;
13. Total quality management; and
14. Health care reform;

H. Financial Management:

1. Budgeting;
2. Financial planning;
3. Asset management; and
4. Accounting;

I. Marketing and Public Relations Principles:

1. Public relation principles;
2. Marketing principles;
3. Newsletters;
4. Community and social organizations; and
5. Working with media;

J. Physical Resource Management:

1. Building and grounds management;
2. Environmental services;
3. Safety procedures and programs; and
4. Fire and disaster plans;

K. Laws, Regulatory Codes and Governing Boards:

1. Medicare and Medicaid;
2. Omnibus Budget Reconciliation Act (OBRA);
3. Occupational Safety and Health Administration (OSHA);
4. Americans With Disability Act (ADA);
5. Life Safety;
6. Legislative process;
7. Board Responsibilities; and
8. By-laws.