

STAFF TRAINING OPTIONS

STATE MANDATED EDUCATION FOR ALL ALF STAFF

PROGRAM SUBSCRIBER-VANGUARD SERVICED FACILITIES AND/OR FALA MEMBERS

- ✓ \$12.00 per bed host facility (Paid one time for classes listed below 6/1/07-5/31/08)
- ✓ \$16.00 per bed more than 25 beds (Paid one time for classes listed below 6/1/07-5/31/08)
- ✓ \$18.00 per bed for 1-25 beds (Paid one time for classes listed below 6/1/07-5/31/08)

NON-SUBSCRIBER-ALL OTHERS

- ✓ \$20.00 per bed for more than 25 beds annually (Paid for classes listed below 6/1/07-5/31/08)
- ✓ \$22.00 per bed for 1-25 beds plus \$100.00 annually (Paid for classes listed below from 6/1/07-5/31/08)

CHANGES IN DAYS, TOPICS AND TIMES BEGIN JUNE 5

CHARGES PER PERSON PER CLASS

<u>Class days,</u>	<u>Times</u>	<u>Hours</u>	<u>FALA/Vanguard</u>	<u>ALL Others</u>
<u>Day 1: Tuesday</u>	8:30am-10: 30 am –Medication update (annually)	2.0	\$10.00	\$20.00
Meds classes free for Vanguard customers	10:30am-11: 30am –Resident Rights/Abuse (@ hire)	1.0	\$5.00	\$10.00
	12:30 pm-4: 30 pm-Assist with Meds (one time)	4.0	\$20.00	\$40.00
<u>Day 2: Wednesday</u>	8:30am-11: 30 am – CPR (Limited #'s, q 2 yrs)	3.0	\$15.00	\$30.00
	12:30pm-3: 30 pm - First Aid (Limited #'s, q 2 yrs)	3.0	\$15.00	\$30.00
	3:30pm-4: 30 pm – Food Handling (@ hire)	1.0	\$5.00	\$10.00
<u>Day 3: Thursday</u>	8:30 am- 10:30 am– HIV/AIDS (q 2 yrs.)	2.0	\$10.00	\$20.00
	10:30 am-11: 30 am– Infection Control (@ hire)	1.0	\$5.00	\$10.00
	12:30pm-1: 30pm –Major Emergencies (@ hire)	1.0	\$5.00	\$10.00
	1:30pm-4: 30 pm – Resident Needs/ ADL's (@ hire)	3.0	\$15.00	\$30.00

STATE APPROVED ALZHEIMER'S CLASSES PLUS OTHER TOPICS AVAILABLE UPON REQUEST AT A SEPARATE CHARGE

PRE- REGISTRATION

All attendees must **pre-register** by **9:00 AM Friday** the week prior to class. **Walk-ins** will be turned away
CERTIFICATES-mailed out from the education department following class after payment is verified (allow 2-3 wks)

INVOICING: COPY, COMPLETE, AND SEND WITH THE INVOICE BELOW & YOUR PAYMENT(S) (NO PERSONAL CHECKS)

Make facility checks payable to: VANGUARD ADVANCED PHARMACY SYSTEMS INC.

Mail your payment to 915 Manatee Ave. East Bradenton, Fl. 34208

Credit cards or checking account Donna @ # @ 941-757-0583

Call TOLL FREE 1-866-363-4058

MORE INFORMATION IS AT OUR WEB SITE www.vanguardrx.com

INVOICE

✂ Cut here -----

PAYMENT ARRANGEMENTS MUST BE MADE PRIOR TO REGISTRATION & ATTENDANCE AT CLASSES

Date _____ Facility Name _____

Street Address _____ City/Zip _____

Phone #: _____ Fax #: _____ Contact Person _____

FALA Member: Yes: ____ No ____ If yes is provide your FALA Member # _____

Bed Fees: use the grid at the top of this page to determine your fees

of beds _____ X per bed charge _____ =Total Due _____ Ck. # _____

CLASS GUIDELINES (Please inform each attendee of 2-10)

1. Each facility is limited to 3 registrants for CPR & First Aid. The # of attendees is determined by AHA rules.
2. No shows without a 24-hour notice will be charged \$10.00 when the person re-registers for class.
3. Class cancellations may occur if there are fewer than 5 registered. Facilities will be notified 24 hours prior to class.
4. Attendees must be pre-registered and arrive at classes 15 minutes prior to the scheduled start time.
5. Participants who are late must be turned away in accordance with class time requirements set in 58-A
6. Students must sign the attendance record at the beginning of each class or credit will not be given.
7. The instructor has permission to ask a student to leave if they are disruptive in class.
8. A student who is dismissed from class for behavior issues may not be permitted to return to class.
9. Dress is comfortable but professional. No smoking except during breaks and in designated areas.
10. Beepers & cell phones must be off or in silent mode. Lunch is not provided.
11. Certificates are mailed out from the education department following class after payment is verified (allow 2-3 wks).

REGISTRATION FORM & INVOICE

This completed form must be faxed to 941-757-0584 before 9 AM the Friday before class (make copies for future use)

Payment is due prior to class. Mail a facility check to: Vanguard Education: 915 Manatee Ave. East, Bradenton, FL 34208

Facility Name/Address: _____

Date _____ Contact Person: _____ Phone: _____ Fax: _____

FALA Member Yes ___ No ___ FALA # _____ Vanguard Customer: Yes ___ Other: Yes ___ Bed fee Pd Yes ___ No ___

Per person fee: # of attendees _____ x number of classes _____ x \$ per class _____ = Total Due _____ Ck. # _____

Class Location _____ **Class Dates** _____

QUESTIONS CALL: @ TOLL FREE 1-866-363-4058 CREDIT CARDS CALL 941-757-0583

<u>PRINT ATTENDEES NAMES</u> <u>LEGIBLY</u>	Med update	Res. Rights	Med. Trng.	CPR	First Aid	Food Hndl.	HIV/ AIDS	Inf. Cont	Emer.	Res. Needs	Fees Per Person	Total Fees or COMMENTS
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												
11.												
12.												
13.												
14.												

FAX FORM TO 941-757-0584 BY 9 AM FRIDAY PRIOR TO CLASS

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