

FLORIDA HOSPICE

& PALLIATIVE CARE ASSOCIATION

EXPRESSION OF INTEREST FOR EDUCATIONAL PRESENTATION OPPORTUNITIES

Florida Hospice & Palliative Care Association (FHPCA), the state's premier provider of hospice, palliative care and end-of-life specific professional education announces it is accepting 'Expressions of Interest' for faculty members and their presentations for several professional educational opportunities.

You are invited to respond by filling out the "Expression of Interest" Form (attached) for consideration as we develop our educational programming for hospice, palliative care, end-of-life and other healthcare professionals.

Presentation Formats

We are pleased to invite leaders, practitioners, and experts in the field of hospice and palliative care to submit proposals for educational presentations occurring in a variety of formats, including (but not limited to) webinar/internet based learning, one-day on-site workshops, keynote and concurrent presentations at our annual forum, individual learning modules and newsletter articles.

Target Audiences

Target attendees are drawn from Florida's hospice programs as well as the broader healthcare community of physicians, nurses, social workers, nursing facility and assisted living administrators and staff, public policy makers and regulators, Veterans Administration staff, hospital staff and others with an interest in high quality hospice and palliative care from Florida and surrounding states.

Expressed Topics of Interest

We seek new and experienced faculty members who have innovative and informative messages to share with those who work with hospice, end-of-life and palliative care issues. Special interest areas include but are not limited to:

- Advance Care Planning
- Advocacy and Public Policy
- Bereavement and Grief
- Care for the Caregiver
- Cultural Diversity
- Disease-Specific Issues (cancer, end-stage lung, renal, Alzheimer's, etc.)
- Ethical Issues/Considerations
- Employee Recruitment and Retention
- Legal/Regulatory/Financial Issues
- Market Trends
- Pain and Non-Pain Symptom Management
- Pediatric Hospice and Palliative Care
- Public Awareness/Sales and Marketing
- Quality Assessment/Performance Improvement
- Risk Management
- Social Media
- Spiritual Care
- Strategic Planning/Succession Planning
- Technology Use in Hospice/Palliative Care
- Volunteer Support/Recruitment/Retention
- Leadership Development
- Other relevant topics

Submission Guidelines and Evaluation

"Expression of Interest" submissions may be completed and returned to FHPCA at any time.

To submit your "Expression of Interest," complete the attached form and email your information to jessica@floridahospices.org. All submissions must include the following:

1. "Expression of Interest" Form
2. An abstract of your presentation(s) of 500 words or fewer including the title of your presentation
3. A typed, double spaced biography of each presenter of 100 words or fewer

All Expressions of Interest will be reviewed by FHPCA staff and/or members of FHPCA's committees. If selected, the identified faculty member(s) agrees to submit additional information as required by FHPCA for continuing education purposes, including signed Letter of Agreement and conflict of interest statement/vested interest statement. FHPCA reserves the right to combine proposed topics and presenters, and to propose topics and recruit speakers in order to be able to offer well-rounded programs. Acceptance of "Expression of Interest" submissions by FHPCA is not to be construed as agreement by FHPCA to use any specific faculty member or their presentation.

EXPRESSION OF INTEREST FORM

Directions: Please fill out form completely. Do not simply attach curriculum vitae or résumé. If submitting more than one presentation for consideration, please attach separate sheet(s) detailing each presentation's title, learning objectives and abstract of content.

Name & Credentials _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Primary Telephone: _____ Primary Fax: _____

Primary Email: _____

Organization Name: _____

Present Position: _____

Presentation Title: _____

Presentation Learning Objectives

1) _____

2) _____

3) _____

4) _____

The recommended format(s) for this presentation would be (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> webinar/internet based learning | <input type="checkbox"/> concurrent presentation at annual forum |
| <input type="checkbox"/> one-day on-site workshops | <input type="checkbox"/> individual learning module |
| <input type="checkbox"/> keynote presentations at annual forum | <input type="checkbox"/> newsletter articles |
| <input type="checkbox"/> Other: _____ | |

Audience Expectations (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Introductory/Basic | <input type="checkbox"/> Administrative/Management |
| <input type="checkbox"/> Intermediate | <input type="checkbox"/> Psychosocial |
| <input type="checkbox"/> Advanced | <input type="checkbox"/> Medical/CME |
| <input type="checkbox"/> General | <input type="checkbox"/> Research |
| <input type="checkbox"/> Clinical | |
| <input type="checkbox"/> Other (list) _____ | |

Remember to attach the following:

- An abstract of your presentation(s) of 500 words or fewer including the title of your presentation
- A typed, double spaced biography of each presenter of 100 words or fewer

Return to Florida Hospice & Palliative Care Association

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Tallahassee, Florida 32301

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Email: jessica@floridahospices.org