

*This Advanced Precepting session is designed for the  
education and enrichment of nurses  
who have at least two years of professional experience.*

**February 11, 2010**

**8:00 AM-1:30 PM**

Greater Cincinnati Health Council  
2100 Sherman Ave., Suite 100  
Cincinnati, OH 45212

[www.gchc.org](http://www.gchc.org)

Contact: Sharon Trainer  
GCHC Workforce Center  
direct 513-878-2856  
E-mail: [strainer@gchc.org](mailto:strainer@gchc.org)

**Greater Cincinnati Health Council**  
Return to:  
2100 Sherman Ave, Suite 100  
Cincinnati, OH 45212  
513-878-2856

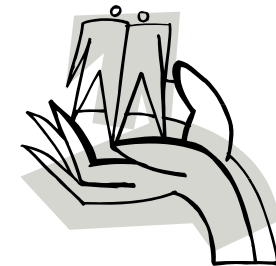
## ADVANCED PRECEPTING:

*~Making a difference one person at a time~*

*February 11, 2010*

*8:00 AM - 1:30 PM*

*GREATER CINCINNATI HEALTH COUNCIL*



*Developing and refining the advanced  
precepting skills of nurses.*

Greater Cincinnati **Health Council**

If it involves health,  
we're involved.

The Advanced Precepting session will provide the health care professional with an opportunity to develop and refine their preceptor skills.

Upon completion of the course, participants will be able to identify their own learning style and the learning style of others, support critical thinking-to-action skills, and provide consistent coaching and feedback to the student or new employee.

Ongoing support for Advanced Preceptors will be established through the *Greater Cincinnati Health Council's Annual Advanced Preceptor Award Program for Nursing and Allied Health Professionals*. Annual award winners will be recognized at the GCHC Solutions Conference and Expo on March 11, 2010.

## LIST OF EVENTS

<b>8:00 - 8:30</b>	REGISTRATION
<b>8:30 - 9:00</b>	ICEBREAKER BINGO Mary Duffey, GCHC
<b>9:00 -10:00</b>	COACHING, PROVIDING FEEDBACK AND SETTING GOALS
<b>10:00-10:30</b>	CARING FOR YOUR SPIRIT
<b>10:30-11:30</b>	LUNCH  GROUP DISCUSSION
<b>11:30-12:30</b>	UNDERSTANDING LEARNING STYLES
<b>12:30- 1:30</b>	TAKING APPROPRIATE CRITICAL ACTION

## Advanced Precepting

February 11, 2010

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2100 Sherman Avenue Suite 100  
Cincinnati, OH 45212

COST: \$40.00, member hospital  
\$55.00, non-member

Name \_\_\_\_\_

Hospital/Organization \_\_\_\_\_

Organization Address \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Method of Payment

CHECK (payable to Greater Cincinnati Health Council)

BILL ME

CREDIT CARD \*submit credit card information to:

Sharon Trainer @ 513-878-2856 or

strainer@gchc.org

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