

**Iowa Dental Hygienists' Association**  
**Local Continuing Education Program Procedure**

**The Iowa Dental Hygienists' Association will sponsor local continuing education programs for dental professionals. Proposal must be submitted by ADHA/IDHA member hygienist.**

**Planning the Program**

- First ensure the course topic is on Iowa Dental Board (IDB) list of accepted topics for continuing education credit. In order for topic to be acceptable, it must meet the guidelines as established in [IAC 650--Chapter 25](#) which is accessible at Iowa Dental Board website.
- Submit course proposal to Iowa Dental Hygienists' Association Board of Trustees using *Local Continuing Education Course Proposal* form below. If course subject matter is questionable to receive CE credit, work with IDHA Continuing Education Chair to submit prior approval form to Iowa Dental Board **at least 90 days** before publication of the CE event. [Prior Approval of Continuing Education](#) form is found on the Iowa Dental Board website and needs to be signed and submitted to IDB by IDHA Continuing Education Chair. If at a later date a course that has not been pre-approved by the IDB is determined not to be eligible for credit, the IDHA is responsible for reimbursing attendance fees to the attendees. **Submit prior approval at least 90 days prior to course.**
- Work with IDHA Continuing Education Chair to obtain signed contract from the speaker (or any documents, such as email correspondence, that note in writing the details of the contract below). All contracts must be signed by an IDHA officer. The original is for the speaker but a copy should be retained for the IDHA Continuing Education Chair's files. See sample contracts below.
- Send copy of contract to IDHA Treasurer.
- BOT to approve contract before signing. (Needs to be submitted to Ad Council for presentation to the BOT.)

**Promotion**

- Promotion: Promote course at least 6 weeks ahead of course date. Submit promotional materials to IDHA CE Chair for approval. Once CE Chair approves promotional material, contact IDHA CE chair to have IDHA Promote course on IDHA website and Facebook page. To mail hard copy promotional flyer, contact IDHA Treasurer to get mailing list.
- Be sure to note Refund policy for CE meetings on all promotional materials: IDHA Refund policy is: Written or email notification must be received by date to be determined to IDHA by mail or mail to IDHA Treasurer. Use discretion in determining last minute refunds. If there is unanticipated sickness or death, it has been customary to refund the entire amount.
- Prior to course, secure ADHA/IDHA member list from IDHA Member Services Trustee to confirm membership status of attendees.

**Day of Event**

- Have attendees sign in on Sign in Sheet. Ask IDHA Continuing Education Chair for a blank Sign in Sheet.
- Pay speaker honorarium day of event. Make sure to get check from IDHA Treasurer prior to the program.

- Distribute attendance verification forms at the end of the program. Ask CE Chair for CE verification form.
- Have attendees complete evaluation form (optional for shorter CE programs of 1-2 hours). Ask CE Chair for copy of evaluation form.

**After program**

Make copy of course sign in sheet and mail original to IDHA Continuing Education (CE) Chair.

- **CE Chair will maintain CE registrations, speaker information, and record of attendance for 5 years. (10/08)**

**Evaluation and follow up of CE Program:**

- Summarize the course evaluation forms (screen most negative comments) and report to IDHA BOT
- Record expenses for the program on CE Proposal Form and submit to IDHA Continuing Education Chair.
- Submit expense receipts to IDHA Treasurer for reimbursement.

**Local Continuing Education Course Proposal**

Please submit this form to Iowa Dental Hygienists' Association Board of Trustees 6 months prior to CE Course.

Course Title: \_\_\_\_\_  
 Presenter: \_\_\_\_\_ Hours of CE Credit: \_\_\_\_\_  
 Date of Presentation: \_\_\_\_\_ Estimated attendance: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Iowa Dental Board Prior Approval confirmed? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Local Contact Person: \_\_\_\_\_  
 Local Contact Person Email \_\_\_\_\_ Phone: \_\_\_\_\_

Item	Proposed Cost	Actual Expense
<b>Presenter Expense</b>		
Honorarium		
Transportation		
Per Diem		
Lodging		
<b>Course Expenditures</b>		
Printing (Handouts/CE Certificates)		
Promotion (brochure printing)		
AV Equipment		
Postage		
Food		
Miscellaneous		

Subtotal	\$	\$
		Total Expenses \$
<b>Course Summary</b>		
Total Expenses		\$
Total Income		\$
NET PROFIT		\$
<b>Proposed Course Fees (IDHA Board of Trustees can provide fee direction)</b>		
Members: Pre registered	\$	Late/Onsite registration \$
Student Fee: Pre registered	\$	Late/Onsite registration \$
Potential Member: pre registered	\$	Potential member late: onsite \$
Other: Pre registered	\$	Late/Onsite Registration \$

**AGREEMENT**  
**TO PRESENT A CONTINUING EDUCATION COURSE BETWEEN**  
**IOWA DENTAL HYGIENISTS' ASSOCIATION**  
**And**  
**Sally Speaker, RDH, MS**

**Course Titles:** *"Teeth Teeth and More"* ~ 6 CEU  
**Location:** Sheraton Hotel, 210 S Dubuque Street, Iowa City, Iowa 52240  
**Date:** Friday, May 2, 2014  
**Course Hours:** Exact hours to be determined, tentatively 8:30 am –12:00 pm (with 1/2 hour break) and 1:30 pm-4:30 pm  
**Honorarium:** \$3,500 to be paid by IDHA to speaker at closure of course  
Sponsorship to be arranged by IDHA exclusively.  
**Expenses:** Travel expenses reimbursed by IDHA up to \$1,000  
**Travel** Roundtrip airfare (Fly into Eastern Iowa Airport (CID). Flight arrangements to be made by speaker. Ground transportation provided by IDHA.  
**Meals** Thursday dinner, Friday meals and Saturday meals through noon if needed.  
**Housing** Up to two nights lodging. Hotel reservations will be made by IDHA.

Speaker will submit invoice for travel expenses after the course to IDHA Treasurer. Treasurer's contact information will be provided as date nears.

Sponsorship will be arranged by IDHA exclusively. IDHA Corporate Relations Chair, Carrie Jones, RDH, may contact speaker to discuss sponsorship opportunities.

Teaching materials: Slides, tapes/DVDs, models, pamphlets, including copyright royalty costs are the presenter's responsibility. Handouts (25 page maximum) will be reproduced by IDHA or emailed to registrants if the original material is received by: Thursday April 17, 2014.

Equipment: Please check audio-visual equipment needed for presentation:

Microphone

LCD projector

Screen

Laser Pointer

Podium

Other \_\_\_\_\_

Advertising: Advance notice of this course, in the form of written registration materials, and online promotion will be made by IDHA. The speaker is required to furnish one color photograph of him or herself for use in publicity information. It is agreed that the speaker will not present a similar course within a geographic radius of two hundred miles from the course site, six months prior to the set date for this particular course.

IDHA assumes no responsibility for the number of enrollees in any course and reserves the right to cancel any course without financial obligation to the speaker on or before April 18, 2014. The speaker agrees to give cancellation notice to IDHA no later than April 4, 2014.

IDHA Contact Person:

Heidi Hygienist, RDH

IDHA Continuing Education Chair

C) 319-530-5555

E) [Hhygienist25@gmail.com](mailto:Hhygienist25@gmail.com)

Speaker's contact information:

Name:

Mailing address:

City, state, zip:

Email address:

Phone:

The terms are agreeable as stated

Speaker's Signature

Date

IDHA Continuing Education Chair

Date

Please sign contract and email to:

IDHA CE Chair

Or send via conventional mail to

Heidi Hygienist, RDH  
IDHA Continuing Education Chair  
503 Maple Street, Des Moines, Iowa 52333