CNE’s Corner

It is with delight that we are introducing a new education stipend for Registered Nurses. This stipend will reimburse some expenses for staff nurses obtaining certification, speaking at conferences and/or attending conferences. Staff nurses suggested creating this fund from the funds previously used for new graduate tuition reimbursement to expand the number of Staff who receives some financial assistance for professional development.

I have always recognized that being a nurse requires a commitment to lifelong learning. With Illinois’ new Nurse Practice Act, our state is finally catching up with that reality and is requiring CEUs for licensure. In addition to our new state requirement, we have a growing professional responsibility to practice in an evidence-based way. We are also expanding Loyola’s nursing research environment. This education stipend creates a mechanism to assist staff nurses as they seek to remain current in their area of practice.

The criteria and mechanism of requesting funds was developed by the Nursing Education and Professional Development Council. And, the review will be done by a sub-committee of this council – your colleagues. I appreciate the work this group did to put this program together. This “extra” addition of Nurse Link is one of the ways they suggested to let all of you know of this opportunity. In addition, I recommend you go to our nursing intranet site, http://www.luhs.org/feature/nursing/develop.htm to see the criteria, frequently asked questions and the application form.

As the Chief Nurse Executive, nothing would please me more than to use every dollar of our education stipend fund each year for you, our nurses, to keep on learning, to develop professionally.

Also, I have news regarding RN night shift differentials. Effective September 16, 2007 the RN night shift differential is being increased to $4.00 an hour. This change is occurring after our compensation survey review of all differentials being paid in the Metropolitan Chicago Healthcare Market. In moving our night shift differentials to $4.00 an hour we will be at a more competitive place in the market compared with other hospitals in the Chicago area (including the Chicago Academic Hospitals).
Education and Empowerment
Linda Flemm, RN MSN, APN, AOCNS

In response to staff nurses suggestion, Loyola has eliminated the new graduate tuition forgiveness program, and has moved this money to an educational fund for all nurses. The nursing education stipend fund provides reimbursement of certification, recertification, conferences, and speaker expenses.

Who is eligible to apply?
A registered nurse in a benefit eligible position for 1 year at Loyola excluding management positions. The RN must be in good standing free of corrective action or work improvement in the past 12 months.

When can I apply?
Applications are accepted anytime, but will be reviewed in batches on a quarterly basis. The dates are Jan 15 th , April 15 th , July 15 th , and Oct 15 th . Our first application is due October 15, 2007. Nurses may submit any conferences attended or certifications obtained July 1, 2007 through October 14 th , 2007.

How do I apply?
Download the Nursing Education Stipend Application from the Loyola nursing website, www.luhs.org/feature/nursing . If you attend a conference, fees up to $300 may be reimbursed. A travel reimbursement form along with original receipts to show proof of payment of the conference and proof of attendance, must be submitted with your application. For certification fees up to $300 may be reimbursed. A travel reimbursement form along with receipt of payment and proof of certification must be submitted with your application. If you are presenting at a conference, fees up to $1000 may be covered including airfare, room and board and conference fee. A travel reimbursement form along with original receipts and conference confirmation letter must be submitted with your application.

How often may I apply?
One approved application per person per calendar year. Exceptions for presenters will be considered.

Will some applications have preference over others?
First preference will be nurses who are speaking at conferences, then certification, and then attending conferences. Every effort will be made to reimburse all eligible applicants however funds are limited. Loyola may not be able to fully reimburse everyone in a particular quarter.
Where do I send my application?
The Health Care Services Administration office to the attention of Lucy Carbonaro, Building 104, Room 1381. If you have any questions regarding the application process please email Barb Hering at bhering@lumc.edu.

Who is reviewing my application?
The Nursing Education and Professional Development council subcommittee will be reviewing all applications.

How will I know if I was approved?
Four to six weeks after the due date you will receive a letter at your home.

How will I receive the reimbursement?
The money will appear on your paycheck as a nontaxable reimbursement. However, this will take up to 3 pay periods after receiving your notification letter to appear. If you have not received reimbursement after 3 pay periods, please contact Lucy Carbonaro at lcarbon@lumc.edu.

The guidelines, application form, and application notification form will follow. All of these forms are available on the website. A travel reimbursement form must be obtained from your manager, and completed and submitted with the application. This will allow payroll to put the reimbursement directly on your check.
Loyola University Health System
Nursing Education Stipend Guidelines

Please follow these guidelines when submitting an application for consideration of funds from the Nursing Education Stipend. Any questions, contact Barb Hering at bhering@lumc.edu. Thank you.

1. A Registered Nurse employed in a benefit eligible position for 1 year at Loyola, excluding those in management positions. The registered nurse must be in good standing free of corrective action or work improvement in the past 12 months.

2. Only 1 approved application per person per calendar year; exceptions for presenters will be considered.

3. Applications are accepted anytime, but will only be reviewed in batches on a quarterly basis. Dates for review are January 15, April 15, July 15, and October 15.

4. Nursing Education Stipend Application Form and top section of Applicant Notification Form must be completely filled out. Missing information will result in the application being returned to you to complete, with the possibility that you will not make the review deadline. You must attach copy of the program brochure/flyer with the application.

5. If attending a conference, only conference fee (or part of fee depending on available funds) will be considered for reimbursement, up to a cap of $300 per year. No other funding source is available to this nurse (Grant coverage, etc).

6. If presenting at a conference (lecture or poster presentation) fees will be covered up to $1000 including airfare, room & board and conference fee if applicable. Only original receipts will be accepted.

7. Reimbursement will be granted after proof of attending conference/activity. A Travel Expense Form (obtain from Manager) will need to be filled out and attached to application for payroll reimbursement. Only original receipts, Xerox copy of conference contact hours, or if a presenter, Xerox copy of conference confirmation letter will be accepted for proof of attendance.

8. Nurse Manager will be responsible for ensuring that you present the information to staff as in-service/posterboard. For example, Manager may delegate follow-up to unit educator, Magnet liaison or include in your annual performance review.

9. Certification: Certification expenses (review course, certification, and recertification fee) may be reimbursed up to a cap of $300 per year. Submit payment receipt and proof of certification.

10. Please understand that funds are limited. We may not be able to fully reimburse everyone in a particular review period. Reimbursement will depend on the number of applications we receive for a given quarter. Every effort will be made to fairly distribute funds.

9/07
Loyola University Health System
Nursing Education Stipend Application

Background Information:  PLEASE PRINT

Name: ____________________________
Address: _________________________
City, State, Zip: ___________________
Home phone: ______________________
Cell phone: ________________________

Work History:

Date of Hire: _____________________  Job Title: ______________________
Work extension: _________________  Unit/Department: _________________
Email address: ____________________

Briefly describe the event and explain how it will impact your nursing care:

☐ Dollar amount requested: _____________________________
☐ I am presenting at the conference: _____________________
☐ As a presenter, the following is being paid for by the conference:

Employee Acknowledgement:

I have provided, or am scheduled to provide, an educational inservice/poster to share the information/knowledge that I have learned with my unit.

Employee signature: ______________  Date: ______________

Manager Acknowledgement:

Employee is currently in good standing, free of corrective action/work improvement for 12 months.  Yes ☐  No ☐

Event is appropriate for job description.  Yes ☐  No ☐

Manager signature: ______________  Date: ______________

Return this application to Lucy Carbonaro, Building 104, Rm 1381. Please follow directions on Nursing Education Stipend Guidelines form. Any questions, contact Barb Herino at bherino@umc.edu
Loyola University Health System
Nursing Education Stipend

Applicant Notification

Complete top section only of this form. Please PRINT.

Date: ____________

Name: ________________________________

Unit/Department: ________________________________

Manager: ________________________________

Home Address: ________________________________

Funds approved (dollar amount): ________________________________

Funds denied: ________________________________

☐ Resubmit with corrections by next application deadline

☐ Applicant notified: copy sent to home address
☐ Manager notified: copy sent
☐ Originals for Education & Professional Development Files

Education Council final approval signature: ________________________________

To Nursing Office for final approval: ________________________________

Any questions, contact Barb Hering at bhering@lumc.edu

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