**BENEFITS AND EXPENSES**

**Benefit Identification**

Your leader is balancing many competing priorities. Therefore, clearly identify the connection between your organization’s needs and SDAHO’s Post Acute Partners in Care Conference when presenting your request.

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| --- | --- |
| **Your organization’s need** *(here are some examples of need)* | **SDAHO Post Acute Partners in Care Conference** **session meeting that need** *(enter specific sessions addressing the area)* |
| Identification and implementation of best practices |  |
| Improved communication techniques |  |
| Improved teamwork |  |
| Improved patient care |  |
| Identification of new technologies or processes |  |
| Legal and ethical considerations |  |
| Identification of new workforce ideas |  |
| Exhibitor / Vendor ~ New products/services to explore |  |

In addition, upon returning from the SDAHO Post Acute Partners in Care Conference, offer to prepare and deliver a short presentation or submit a brief write-up of the top 1-2 sessions you attended. This allows your peers to gain benefit from your attendance.

**Calculating Expenses**

The following table will help you identify estimated common expenses for attending the SDAHO Post Acute Partners in Care Conference.

|  |  |
| --- | --- |
| SDAHO Post Acute Partners in Care Conference registrationSDAHO Member, Individual Registration = $200SDAHO Member, Facility Package (5 participants) = $500 (additional registrations at $50 per person)SDAHO Non-Member, Individual Registration = $375 | $ |
| Travel (e.g. Mileage or Airfare Reimbursement) | $ |
| Hotel | $ |
| Food (SDAHO Post Acute Partners in Care Conference provides 4/8 ~ lunch, snack, appetizers, and beverages; 4/9 ~ breakfast, snacks, and beverages) | $ |
| SUBTOTAL | $ |
| Other expenses | $ |
| GRAND TOTAL | $ |