

SAPNA Member Coaching & Mentoring

Program *13th April, 15th June, 6th July 2024*



The **SAPNA Member Coaching & Mentoring Program** is open to all SAPNA members. The applicant may be a Registered nurse level one (1) or two (2) or Enrolled nurse wanting to further their knowledge and skills in coaching and mentoring.

The Aim of the program

The **SAPNA Member Coaching and Mentoring Program** aims to develop the knowledge and skills to successfully coach and mentor new and developing perioperative nurses building on SAPNA's values of *Care, Vision, and Excellence*.

The Coaching and Mentoring Program

The **SAPNA Member Coaching and Mentoring Program** consists of three half day sessions to be held on 13th April, 15th June and 6th July.

Participants need to be available to attend all three sessions.

The workshops are facilitated by Professional Development Training.

A maximum of ten participants will be chosen from the public, private and rural settings. Rural participants will be able to participate online.

SAPNA will pay the majority of the cost of the program with successful applicants required to pay \$250.00 for the program.

Each applicant will be encouraged to identify a mentor in their workplace who will support the applicant in developing and delivering a Coaching and Mentoring Project which forms part of the program.

At completion of the program, successful members will be presented with a certificate of completion.

Successful applicants may be required to present at either a:

- SAPNA Conference
- SAPNA Country Study Weekend or,
- SAPNA Saturday education session

The application form is overleaf or can be downloaded from the SAPNA website www.sapna.org.au.

Applications must be received by the SAPNA Secretary by 1st March 2024. A confirmation of receipt email will be forwarded to the applicant.

Successful applicants will be chosen by members from the SAPNA Committee based on the information presented in their application.



SAPNA Member Coaching & Mentoring Program Application Form

Personal Details

Name: SAPNA Member Number:

Postal Address:

Email Address: Phone:

Please circle one or more of the following

RN EN

Number of Years qualified?

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Where you work

Public Private Rural Agency

Perioperative speciality

Anaesthetics Operating theatres Post anaesthetic
Care Unit Day surgery

Outline how you believe this program will positively benefit yourself and your organisation? Add more lines if required.

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*Outline how you will integrate SAPNA's values of **Care, Vision, Excellence** into coaching and mentoring in your workplace? Add more lines if required.*

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If chosen to present, which SAPNA event would you prefer to present at? Please circle your preference.

SAPNA Conference SAPNA Country Study Day SAPNA Saturday Education Session

By submitting this application, you agree to completing all 3 sessions and paying the cost of \$250 for the program. Failure to complete all sessions may result in SAPNA recovering the full cost of the program (\$1000) from the applicant.

Signed Date.....

Please email the completed application to: secretariat@sapna.org.au