# LOS ANGELES COUNTY COLLEGE OF NURSING AND ALLIED HEALTH POLICY & PROCEDURE MANUAL

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Subject: TRAVEL AND TRAINING REQUESTS		Original		Policy #:		
		Issue Date: August 12, 2004		230		
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		May 8, 2008		March 10, 2011		11
Committees Consulted:	Reviewed & Approved by:		Approved by:			
College Administration	College Planning					
Nursing Program Coordinators						
			(Signature	on File)		
			Provost, C	ollege of N	ursing	g &
			Allied Heal	lth		

#### **PURPOSE:**

To provide guidelines and procedures to assist College employees to obtain approval and reimbursement for travel and training

## **POLICY:**

Requests for educational/training time only require Provost/designee approval.

Requests for funds require Provost and Department of Health Services (DHS)/Network CNO/CEO approval.

The College adheres to the Memorandum of Understanding (MOU) regarding educational hours.

 The amount of time spent in continuing education is regulated by College Administration and is dependent upon College needs and requirements of external accreditation and licensing agencies.

#### PROCEDURE:

Faculty/staff member completes and submits the following forms to their immediate supervisor for approval prior to the event

- No reimbursement requested: 2 weeks minimum
- Reimbursement requested: 6 weeks minimum

#### Healthcare Network Class

Application for Medical Center Employees (pink)

#### Non-Network Class

- Request to Attend Non-Medical Center Programs (blue)
- Class/program brochure
- Travel Request, Request for Approval of Training, Travel/Training Cost Estimates
  - Only required for reimbursement of funds

#### Immediate supervisor:

- Reviews application and brochure for:
  - Relevance of content to requestor's assignments
  - Conflicts with scheduled assignments
    - Weekend or holiday time is not approved for training unless the class content is mandatory for job duties e.g., BLS Instructor course
- Approves or denies time request and signs application
- Notifies employee and division director of request status within one week of receipt

Subject:

#### TRAVEL AND TRAINING REQUESTS

#### Request for Time Only

Submits signed original to educational timekeeper

## Request for Funds

Submits to Provost within one week of receipt from faculty.

## Provost/designee:

- Signs forms indicating approval status:
  - Application
  - Travel Request and Request for Approval of Training Department Head sections
- Submits signed forms to DHS/Network CNO/CEO for final approval (request for funds only)
- Notifies faculty/staff member, supervisor, and educational timekeeper of final approval status

#### Post Program

#### Faculty/staff member:

- Submits a copy of the proof of attendance to educational timekeeper upon return to work
  - Failure to submit a certificate of completion shall result in a payroll correction to change the employee's time from Training Time to Absent Without Pay (AWOP)
- Submits copies of proof of attendance, payment receipts, approved travel requests and Expense Claim to CNO/CEO's secretary for reimbursement.

#### Educational Timekeeper:

- Documents faculty educational activities
- Notifies faculty to submit proof of attendance if not received with copy of notification to supervisor
- Maintains Class Program Applications for College employees for five years
- Files applications by year and employee name.

## PROCEDURE DOCUMENTATION:

Travel Request

Request for Approval of Training

Travel/Training Cost Estimate

**Expense Claim** 

Class/Program Application for Medical Center Employees (Pink)

Request to Attend Non-Medical Center Programs (Blue)

## **REFERENCES:**

Applicable Memoranda of Understanding

DHS Policy #582: Travel Claims

Network Policy #544: Employee Education and Training

Network Policy #512: Continuing Education Nursing Policy #531: Staff Development College Policy #515: Faculty Competency

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## TRAVEL AND TRAINING REQUESTS

REVISION DATES:	
August 12, 2004 May 8, 2008 March 10, 2011	
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