

CALL FOR PRESENTERS

Fall Convention October 1-3, 2025
Wild Dunes Resort- Isle of Palms, SC



- **Presentation submissions must be received no later than July 1, 2025. Please complete and email the attached application along presenter's biography to SCALA@scassistedliving.org.**
- **Programs must be of an educational nature and cannot be an advertisement for an individual, company, product, or service. We will dismiss any presentations that do not meet the educational expectations set forth by the Conference Committee. Any presentations deemed as a sales pitch for a company and not offering educational content will not be accepted.**
- **Theme for the 2025 Convention: Halloween Theme. *Frights and Insights: Elevating Quality Care for Senior Living***
- **Presentations should tie into the theme.**

Educational topics may include but not be limited to:

- Leadership/Management
- Marketing/Sales/Public Relations
- Technology in Assisted Living
- Staffing/ HR/Operations
- Motivational
- Regulatory & Compliance
- Risk Management
- Resident Care
- Activities
- Dining Services
- Clinical
- Memory Care/Dementia
- Legal Topics

Specific Requests include:

- Interviewing/hiring
- Preventing burnout
- Life/work balance
- Education vs. marketing of product
- Scheduling tips
- Staffing suggestions
- Panel of caregivers for a discussion -Peer panels
- Trends in management for today's employees
- Employee engagement - how to improve
- Psych services for resident (what to do)
- Creating energy with managers to achieve team goals
- Lead generating/advancing with maybe % of how many tours/leads/move in's needed to make revenue with statistics from previous quarter?
- Behavior skills
- Understanding influence

Other speaker requirements:

- To work closely with the Conference Committee and Executive Director and meet all deadlines.
- To make no substantial changes to content, format, audio/visual needs, room set-up, identity or number of presenters without prior approval from SCALA.
- To design and provide high-quality PowerPoint presentations if applicable, in electronic format, by the deadline given and provide SCALA a copy of the presentations.
- To give SCALA permission to audio and/or video record their session if needed and to allow photos of the presentation event to be taken for the purpose of using on the SCALA website and/or newsletter and other printed or digital material used by SCALA marketing.
- To respect SCALA as the sponsoring organization with either positive or neutral comments from the platform.

Please note that we will provide for each session:

- Laptop, Screen, Projector, Sound (Speakers), Wireless internet, Wireless Microphone



South Carolina Assisted Living Association

PO Box 4561, Irmo, SC 29063

Phone: 803.851.6308 Fax: 803.753.9296

Email: SCALA@scassistedliving.org

Website: www.scassistedliving.org

CALL FOR PRESENTERS

Date: October 1-3, 2025

Location: Wild Dunes Resort, Isle of Palms, SC

Due date for this form: July 1, 2025

Theme: Halloween Theme. Frights and Insights: Elevating Quality Care for Senior Living

Please submit brief bio to [SCALA @scassistedliving.org](mailto:SCALA@scassistedliving.org) along with this application.

Thank you for your interest in presenting. Please email this form to SCALA@scassistedliving.org or fax to 803-753-9296. We appreciate your submissions and will be in contact soon!

Product pitches or those presentations appearing as such will not be accepted.

Proposed Session Title/Topic _____

Description _____

Length of Session: 1 hour Special request for longer time (up to 2 hours max)

Presentation Day Preference (if any) _____

Type of Presentation (lecture, panel, interactive, round table) _____

Media or A/V needed _____

Requested fee or concessions for presentation _____

Learning objectives: Please provide at least 1 or 2 learning objectives for the session. A list of action verbs to assist in writing learning objectives can be [found here](#).



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1. PRESENTER INFO:

Presenter Name _____

Email _____

Employer _____

Title or Position _____

Contact Phone (_____) _____

Current Responsibilities: _____

Any Additional Qualifying Experience: _____

Academic Information:

Institution _____

Degree _____ Major _____

Year of Graduation _____

2. **Additional Presenter (if any):**

Presenter Name _____

Email _____

Employer _____

Title or Position _____

Contact Phone (_____) _____

Current Responsibilities: _____

Any Additional Qualifying Experience: _____

Academic Information:

Institution _____

Degree _____ Major _____

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