OASIS 2016

MAY 4-6

Niagara Falls
Ontario

GENERATE the **POWER**
CAPTURE the **ENERGY**
INSPIRE the **FUTURE**

Call For Presentations

oasis.ontario   @oasisontario

www.oasisonline.ca

OASIS 2016
MAY 4-6
Niagara Falls Ontario

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To submit presentations please send the following information with completed response form attached:

CONTACT INFORMATION
Provide full contact information including phone number and email address of the individual who is submitting the proposal.

PRESENTER INFORMATION
A brief bio on all presenters *(one paragraph each)*

PRESENTATION INFORMATION
A title and a brief description of your presentation.

TARGET AUDIENCE
Identify if your session will be relevant to:

- All audience members — *or a combination of the following;*
- Human Resources
- Executive Directors
- Board Members
- Senior Managers
- Funding/Finance

INCLUSION TO PRESENTER
Speaker profile (bio) will be included in event registration and marketing materials.

SUBMISSION DEADLINE
All submissions are due by:
October 14, 2015

Submit to:
kassiaj@innovcc.ca

GENERATE the POWER

AN INVITATION TO PRESENT

OASIS (Ontario Agencies Supporting Individuals with Special Needs) will be holding its 19th Conference and Annual General Meeting at the beautiful Sheraton on the Falls, May 4-6, 2016, in spectacular Niagara Falls, Ontario. Situated in one of Ontario's most attractive tourist regions and wine country, over 350 conference delegates will descend on Niagara Falls to enjoy three days of professional development, networking and fun!

The 2016 conference will be co-hosted by all of Niagara's OASIS member agencies with the leads being Community Living – Grimsby, Lincoln & West Lincoln and Niagara Support Services.

We hope presenters and sponsors alike are excited by our theme of **Generate the Power, Capture the Energy, Inspire the Future**.

We invite you to submit your proposal for sharing your valuable expertise with your colleagues by following the submission process outlined here. Presenters will have a choice of a 50 minute session or a 75 minute session. Sessions should include a brief question and answer period.

Note: Allotted time subject to change based on demand and final schedule.

CONTENT RECOMMENDATIONS

The following topics are a guide to the types of topics you may consider. This list is not exhaustive, but reflects the themes of the conference or areas of interest to OASIS members. Overlap is possible.

- Respect and diversity
- Health and wellness
- Community inclusion – equity and access
- Ethics
- Employment and education opportunities
- Self-advocacy
- Risk management in non-traditional residential settings
- Innovative practices
- Quality Assurance
- Innovative service approaches
  - Shared services
  - Entrepreneurship
  - Social enterprise
  - Passport funding
  - Fee for service options
- Legislation
- Partnerships
- Communication / social media
- Change management
- Succession planning
- Technology
- Aging

Proposals on other topics of interest will also be considered.

CAPTURE the **ENERGY**

PLEASE COMPLETE ALL FIELDS: *Form 1 of 2*

Session Title - *15 words maximum*

Presentation Description - *250 words maximum*

Preferred Length of Presentation

☐ 50 minutes   ☐ 75 minutes

Target Audience - *Check all that apply*

☐ All Audience Members

☐ Executive Directors   ☐ Human Resources

☐ Board Members   ☐ Senior Managers

☐ Funding / Finance

☐ Other

Permissions – *If your presentation is selected, do we have your permission to:*

☐ ☐   Include session description,
YES NO   speaker photos, speaker bios in all printed and electronic conference materials?

☐ ☐   Reproduce any hand-outs
YES NO   (.pdf files) to be distributed to conference registrants?

☐ ☐   Video or Audio tape the
YES NO   presentation?

OASIS PRESENTER INFORMATION

Submit to:
kassiaj@innovcc.ca

QUESTIONS
Should you have any questions, please forward to:

OASIS 2016 Contact:

Kassia Tjia

P.   519-652-0364

E.   kassiaj@innovcc.ca

All submission will be reviewed and selected by the Planning Committee.

Selected presenters will be notified by December 11, 2015.

INSPIRE the FUTURE

PLEASE COMPLETE ALL FIELDS: *Form 2 of 2*

Primary Contact

Professional Title

Organization

Address

City   Province   Postal Code

Office Phone   Cell Phone

Email

OTHER PRESENTERS

Name

Title

Organization

Email   Phone

Name

Title

Organization

Email   Phone

Name

Title

Organization

Email   Phone

SPEAKER REFERENCE

Name

Email   Phone