



**STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC**

**Staff Name: Andre Ford**

**Title: Behavior Tech**

Before having unsupervised direct contact with persons served or for whom the staff has not previously provided direct support or any time these plans or procedures are revised, staff must review and receive instruction in the following areas as they relate to the staff's job functions **for that person. \*Complete this form for each person served to whom the staff person will be providing direct contact services.**

**Training topics for community residential services (settings):** training and competency evaluations must include the following topics, marked with an asterisk(\*) if identified in the *Coordinated Service and Support Plan*.

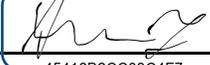
**Name of person served: Carissa Lindstrom**

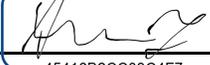
Orientation to individual service recipient needs	Date of completion	Date and type of demonstrated competency	Length of training	Name of trainer and company, if applicable
*Appropriate and safe techniques in personal hygiene and grooming including:	4/14/25	Review w/ Supervisor	.25	Krystal Carlock, DC
Hair care				
Bathing				
Care of teeth, gums, and oral prosthetic devices				



Other activities of daily living (ADLs) per 256B.0659-specify				
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	4/14/25	Review w/ Supervisor	.25	Krystal Carlock, DC
*Skills necessary to provide appropriate support to instrumental activities of daily living (IADLs) per 256B.0659-specify	4/14/25	Review w/ Supervisor	.25	Krystal Carlock, DC
CPR, if required by the CSSP or CSSP Addendum	N/A	N/A	N/A	N/A
CSSP, CSSP Addendum, and Self-Management Assessment to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans. Include outcomes, behavior plans, and any document specific to the person.	4/14/25	Review w/ Supervisor	.25	Krystal Carlock, DC



<p><i>Individual Abuse Prevention Plan</i> to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans</p>	<p>4/14/25</p>	<p>Review w/ Supervisor</p>	<p>.25</p>	<p>Krystal Carlock, DC</p>
<p><i>Program Abuse Prevention Plan</i> to achieve and demonstrate an understanding of the *Community Residential Services site and how to respond accordingly</p>	<p>4/14/25</p>	<p>Review w/ Supervisor</p>	<p>.25</p>	<p>Krystal Carlock, DC</p>
<p>Other topics as determined necessary according to the person's <i>Coordinated Service and Support Plan</i> or identified by the company:</p>	<p>4/14/25</p>	<p>Review w/ Supervisor</p>	<p>.25</p>	<p>Krystal Carlock, DC</p>
<p>Employee:</p>	<p>Signed by: </p>		<p>4/17/2025</p>	

Signed by: 

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