

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

Rin Bromangen

Date of hire: 5/27/25

Date of background study submission: 5/27/2025

Date of background study clearance: 5/30/2025

Ongoing annual training period: 5/24

Date of first supervised contact: 6/03/2025

Date of first unsupervised contact:

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**

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

Name of person served: Gabrielle Ansarski

Orientation to individual service recipient needs	Date of completion	Type of demonstrated competency	Length of training	Name of trainer and company, if applicable
*Appropriate and safe techniques in personal hygiene and grooming Hair care Bathing Care of teeth, gums, and oral prosthetic devices Other activities of daily living (ADLs) per 256B.0659-specify:	6.3.25	Competency based training w/ Designated Coordinator	0.5	Lisa Trisko-DC 157th
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet		Competency based training w/ Designated Coordinator	0.25	Lisa Trisko-DC 157th
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:		Competency based training w/ Designated Coordinator	0.25	Lisa Trisko-DC 157th
CPR, if required by the Support Plan and Support Plan Addendum				

<p><i>Support Plan Support and Plan Addendum, and Self-Management Assessment</i> 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</p>	6.3.25	Competency based training w/ Designated Coordinator	1	Lisa Trisko-DC 157th
<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</p>		Competency based training w/ Designated Coordinator	0.5	
<p>Medication set up or medication administration training when staff set up or administer medications. <b>Training also includes specific medication set up or administration procedures for the person</b></p>		Competency based training w/ Designated Coordinator	0.25	
<p>The safe and correct operation of medical equipment used by the person to sustain life or to monitor a medical condition that could become life threatening. This training must be provided by a licensed health care professional or <b>manufacturer's representative</b></p>		Competency based training w/ Designated Coordinator	0.25	
<p>Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness</p>	6.3.25	Completed in Star Services LMS	Completed in Star Services LMS	Completed in Star Services LMS
<p><b>Other topics as determined necessary according to the person's Support Plan or identified by the company:</b></p>		<b>Date and type of demonstrated competency</b>	<b>Length of training</b>	<b>Name of trainer and company, if applicable</b>
<p>Topic: Crisis plans if applicable</p>		Competency based training w/ Designated Coordinator	0.25	

Topic: Seizure protocols if applicable	NA	Competency based training w/ Designated Coordinator	0.25	
Topic: Elopement protocols if applicable	6.3.25	Competency based training w/ Designated Coordinator	0.25	
Topic: Diabetes protocols if applicable	NA	Competency based training w/ Designated Coordinator	0.25	
Rights restrictions if applicable	NA	Competency based training w/ Designated Coordinator	0.25	
Topic: Other Medical emergencies protocols if applicable	NA	Competency based training w/ Designated Coordinator	0.25	



Staff signature

6/3/2025

Date

\*I understand the information I received and my responsibilities for their implementation in the care of persons served by this program.