Training Summary Form

I. **Employee:** Melanie McCarty Topic: **CHILD FOSTER CARE 410** Credit Hours: 1.0

II. **Description of Training Content:**

Review and instruction on Minnesota Rules, Chapter 2960, Parts 2960.3000 – 2960.3340 for Child Foster Care with applicability to position at Owakihi Inc.

III. **Training Procedures**

Training Format

- X Self Study
- X Individualized Training
- ____ Team Meeting
- ____ Owakihi Inserviceice
- ____ Other:____

Instructional Methods

BEACON Specialized Living

- X Written: CFC statute
- ____ Oral Presentation and Dialogue
- ____ Guided Observation
- ____ Guided Practice
- ____ Other:____

Competency Evaluations

- X Knowledge Testing (Quiz)
- ____ Observed Skill Assessment
- ____ Other:____

IV. **Date(s):** 05-11-2020 (M/D/Y) Trainer/Position: James West / DC

Time(s): ____ (AM or PM) Trainer Signature: [signature]

I acknowledge that I have received and read Minnesota Rules Chapter 2960 (Umbrella Rule/Licensing Standards). I understand the Discipline Policy that prohibits corporal punishment.

Employee Signature: Melanie McCarty Date: 5-11-2020

Training hours need to be recorded by employee on corresponding timecard for reimbursement and training documentation purposes.

Training Module 410 Quiz
CHILD FOSTER CARE

EMPLOYEE NAME: Melanie McCarty **DATE OF QUIZ:** 5-11-2020

Directions: Upon completion, please return the completed quiz and attached Training Summary Form to your Designated Coordinator (DC) or Designated Manager (DM) for review and approval.

1. The DHS Child Foster Care Rule defines a "foster child" as a person who is under 18 years of age.

   Applicant must be at least 21

2. According to the DHS Child Foster Care License Holder Qualifications, employees must be at least 21 years old to work. X TRUE ~~X~~ FALSE 2960.3060 Sub 3 4

3. "Cooperation Required" (subpart 5 in part 2960.3080) - Identify at least one area of responsibility for the license holder/Owakihi Inc. that pertains to developing and implementing the child's case plan: recommend A's in case plan to case plan manager if needed

4. What is the name of the Owakihi Inc. policy that identifies procedures for addressing complaints and grievances? The grievance policy

5. Place an X next to the Staff Training Requirements that are required for child foster care:
   - X emergency procedures
   - X cultural diversity
   - ___ pet care
   - X data practices

6. a. Please identify any questions that you have at this time regarding child foster care:

   _____

   b. Based on the information you have reviewed, what further instruction do you need in this training topic to be competent in performing your job responsibilities?

   _____

   c. Identify 2 agency resources that you can use for more information and/or consultation:

   1) DC 2) DM

KNOWLEDGE TESTING BY TRAINER

- **Note the question(s) answered incorrectly, and the action taken to assure that the employee understands the correct response(s)** _____

- **The employee identified above has demonstrated competency in completion of the quiz questions.**

Signature of DC or DM **Date** 5/11/20