

Owakhi, Inc.
Training Summary Form

I. **Employee:** Anthony Adiepinu **Topic:** SUID & AHT off Year Video Training Verification **Credit Hours:** _____

II. **Description of Training Content**

Review Minnesota Statutes, section 245A.50, requires sudden unexpected infant death (SUID) training for all license holders, staff person; caregivers and helpers who assist in the care of infants. Abusive head trauma (AHT) training is required for all license holders, staff person; caregivers, and helpers who care for infants and children under school age. On the off years when the license holder is not receiving SUI and AHT training face-to-face, in a classroom, or online, the license holder, staff person, caregiver, or helper must receive SUID and AH training through a video of no more than one hour in length.

III. **Training Procedures**

<u>Training Format</u>	<u>Instructional Methods</u>	<u>Demonstrated Competency</u>
<input checked="" type="checkbox"/> Self Study	Written: _____	Knowledge Testing (Quiz) _____
Individualized Training _____	Video Tape: 1 hour _____	Observed Skill Assessment _____
Supervisory Meeting _____	Oral Presentation and Dialogue _____	Other: <u>Signature Verification</u> _____
Team Meeting _____	Guided Observation _____	
Owakhi In service _____	Guided Practice _____	
Other: _____	Other: _____	

IV. **Date(s):** 5/3/2020 **Trainer/Position:** See above-
(M/D/Y)
Time(s): _____ **Trainer Signature:** W. B. V. [Signature]
(AM or PM)

I understand the information I received and my responsibilities for implementation with this company and persons served.

Employee Signature: _____

