

STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: Fortun Nees
Date of hire: 11-17-20
Date of background study submission: 11-18-20
Date of background study clearance: 1-11-21
Ongoing annual training period: 5/21-5/22
Date of first supervised contact: 11-23-20
Date of first unsupervised contact: 11-29-20

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: Dominick Cochrane

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: Hair care Bathing Care of teeth, gums, and oral prosthetic devices Other activities of daily living (ADLs) per 256B.0659-specify:	9/23	Verbal	1hr	Tessa Sitko
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	9/23	Verbal	1hr	Tessa Sitko
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	9/23	Verbal	1hr	Tessa Sitko
CPR, if required by the CSSP or CSSP Addendum	9/23	Verbal	1hr	Tessa Sitko

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	9/23	Verbal	1 hr	Tessa Sitko
Individual Abuse Prevention Plan to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans	9/23	Verbal	1 hr	Tessa Sitko
Medication set up or medication administration training when staff set up or administer medications. Training also includes specific medication set up or administration procedures for the person	9/23	Verbal	1 hr	Tessa Sitko
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 manufacturer's representative	N/A	N/A	N/A	N/A
Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness	11/9/21 4.9.21 erroneous	Verbal & Physical	4 hours	Brandon Jensen
Other topics as determined necessary according to the person's Coordinated Service and Support Plan or identified by the company: Topic: Topic: Topic:	9/23	verbal	1 hr	Tessa Sitko

Staff signature  Date 9/23/21

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

STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: Fortun Dor **Date of hire:** 8/17/20
Date of background study submission: 11/8/20 **Date of background study clearance:** 1/4/21
Ongoing annual training period: 5/21-5/22
Date of first supervised contact: 11/23/20 **Date of first unsupervised contact:** 11/29/20

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: LOUIS WOJCIEK

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: Hair care Bathing Care of teeth, gums, and oral prosthetic devices Other activities of daily living (ADLs) per 256B.0659-specify:	9/23	verbal	1h	Tessa Sitko
* Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	9/23	verbal	1h	Tessa Sitko
* Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	9/23	verbal	1h	Tessa Sitko
CPR, if required by the CSSP or CSSP Addendum	9/23	verbal	1h	Tessa Sitko

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	9/23	Verbal	1h	Tessa Sitko
Individual Abuse Prevention Plan to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans	9/23	Verbal	1h	Tessa Sitko
Medication set up or medication administration training when staff set up or administer medications. Training also includes specific medication set up or administration procedures for the person	9/23	Verbal	1h	Tessa Sitko
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 manufacturer's representative	N/A	N/A	N/A	N/A
Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness	11/19/21 4-2-21 corrects	Verbal & Physical	4 hour	Brandon Jensen
Other topics as determined necessary according to the person's Coordinated Service and Support Plan or identified by the company: Topic: Topic: Topic:	9/23	Verbal	1h	Tessa Sitko

Staff signature  Date 9/23

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

STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: Fortum Noor
Date of background study submission: 11.18.20
Ongoing annual training period: 5/21-5/22
Date of first supervised contact: 11.23.20
Date of hire: 11.17.20
Date of background study clearance: 1.4.21
Date of first unsupervised contact: 11.29.20

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 asterick (*) if identified in the *Coordinated Service and Support Plan*.

Name of person served: <i>Cody Forcier</i>					
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: Hair care Bathing Care of teeth, gums, and oral prosthetic devices Other activities of daily living (ADLs) per 256B.0659-specify:	9/23	Verbal	1hr	Tessa Sittko	
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	9/23	Verbal	1hr	Tessa Sittko	
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	9/23	Verbal	1hr	Tessa Sittko	
CPR, if required by the CSSP or CSSP Addendum	9/23	Verbal	1hr	Tessa Sittko	

<p>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</p>	<p>Verbal 9/23</p>	<p>Verbal</p>	<p>1hr</p>	<p>Tessa Sitko</p>
<p>Individual Abuse Prevention Plan to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans</p>	<p>9/23</p>	<p>Verbal</p>	<p>1hr</p>	<p>Tessa Sitko</p>
<p>Medication set up or medication administration training when staff set up or administer medications. Training also includes specific medication set up or administration procedures for the person</p>	<p>9/23</p>	<p>Verbal</p>	<p>1hr</p>	<p>Tessa Sitko</p>
<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 manufacturer's representative</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness</p>	<p>1/19/21 4/2/21 error TS</p>	<p>Verbal & Physical</p>	<p>4 hours</p>	<p>Brandon Jensen</p>
<p>Other topics as determined necessary according to the person's Coordinated Service and Support Plan or identified by the company: Topic: Topic: Topic:</p>	<p>9/23</p>	<p>Verbal</p>	<p>1hr</p>	<p>Tessa Sitko</p>

Staff signature  Date 9/23/21

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