

STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: Alvan Aibb

Date of background study submission: 1/4/20

Ongoing annual training period: Jan 2021 - July 2022

Date of first supervised contact: 1. 20. 20

Date of first unsupervised contact: 1. 30. 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: Surviv Winnel

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:	9.23.21	9.23.21 verbal	1 hour	Toni Stepanick
Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	9.23.21	9.23.21 verbal	1 hour	Toni Stepanick
Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify: PR, if required by the CSSP or CSSP addendum	9.23.21 11.3.20	9.23.21 verbal 11.3.20 verbal	1 hour 1 hour	Toni Stepanick Toni Stepanick

<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>	9.23.21	9.23.21 Verbal	0.5 hours	Tori Sheparnick
<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>	9.23.21	9.23.21 Verbal	0.5 hours	Tori Sheparnick
<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>	9.23.21	9.23.21 Verbal	1 hour	Tori Sheparnick
<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>	9.23.21	9.23.21 Verbal and physical	1 hour	Tori Sheparnick
<p>Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness</p>	2.20.20	2.20.20 verbal and physical	3.5 hours	Amber Jensen
<p>Other topics as determined necessary according to the person's Coordinated Service and Support Plan or identified by the company:</p>	NA	NA	NA	Tori Sheparnick
<p>Topic:</p>	NA	NA	NA	Tori Sheparnick
<p>Topic:</p>	NA	NA	NA	Tori Sheparnick
<p>Topic:</p>	NA	NA	NA	Tori Sheparnick
<p>Staff signature</p>	Tori Sheparnick	Tori Sheparnick	9/23/21	Date

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: Liban Abib

Date of background study submission: 1/14/20

Ongoing annual training period: Oct 2021 - July 2022

Date of first supervised contact: 1. 20. 20

Date of hire: 1.14.20

Date of background study clearance: 1.21.20

Date of first unsupervised contact: 1.30.20

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: LaMerina Davis

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-specificy:	<u>9.23.21</u>	<u>9.23.21</u> <u>verbal</u>	<u>1 hour</u>	<u>Toni Stepanick</u>
Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	<u>9.23.21</u>	<u>9.23.21</u> <u>verbal</u>	<u>1 hour</u>	<u>Toni Stepanick</u>
Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specificy:	<u>9.23.21</u>	<u>9.23.21</u> <u>verbal</u>	<u>1 hour</u>	<u>Toni Stepanick</u>
PR, if required by the CSSP or CSSP addendum	<u>11.3.20</u>	<u>11.3.20</u> <u>verbal</u>	<u>1 hour</u>	<u>Toni Stepanick</u>

<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>9.23.21</p>	<p>9.23.21 Verbal</p>	<p>0.5 hours</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal</p>	<p>0.5 hours</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal</p>	<p>1 hour</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal and physical</p>	<p>1 hour</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal and physical</p>	<p>3.5 hours</p>	<p>Amber 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>NH</p>	<p>NH</p>	<p>NH</p>	<p>Tori Stepaniak</p>

Staff signature

Tori Stepaniak

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: Lilouan ADB

Date of background study submission: 1/14/20

Ongoing annual training period: July 2021 - July 2022

Date of first supervised contact: 1.20.20

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: Jennifer Staszewicz

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:	9.23.21	9.23.21 verbal	1 hour	Tori Stepaniak
Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	9.23.21	9.23.21 Verbal	1 hour	Tori Stepaniak
Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	9.23.21	9.23.21 verbal	1 hour	Tori Stepaniak
PR, if required by the CSSP or CSSP addendum	11.3.20	11.3.20 verbal	1 hour	Tori Stepaniak

<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>9.23.21</p>	<p>9.23.21 Verbal</p>	<p>0.5 hours</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal</p>	<p>0.5 hours</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal</p>	<p>1 hour</p>	<p>Tori Stepaniak</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>9.23.21</p>	<p>9.23.21 Verbal and physical</p>	<p>1 hour</p>	<p>Tori Stepaniak</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>9.23.20</p>	<p>9.23.20 verbal and physical</p>	<p>3.5 hours</p>	<p>Amber 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>NH</p>	<p>NH</p>	<p>NH</p>	<p>Tori Stepaniak</p>

Staff signature *Tori Stepaniak*

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.