STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

taff name: Nyakhach Rial **Date of hire:** 5/28/20
)ate of background study submission: 5/28/21 **Date of background study clearance:** 5/28/21
)ngoing annual training period: June 2021 - June 2022
)ate of first supervised contact: 6/2/20 **Date of first unsupervised contact:** 6/12/20

efore 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 re 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 erson served to whom the staff person will be providing direct contact services.**

'raining topics for community residential services (settings): training and competency evaluations must include the following topics, marked with an asterick (*) if lentified in the *Coordinated Service and Support Plan*.

Iame of person served: Sarah R.

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 ygiene and grooming including: Hair care; Bathing; Care of teeth, gums, and oral prosthetic devices; Other activities of daily living (ADLs) per 256B.0659-specify:	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
'Understanding of what constitutes a healthy liet according to data from the CDC and the kills necessary to prepare that diet	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
'Skills necessary to provide appropriate upport in instrumental activities of daily iving (IADLs) per 256B.0659-specify:	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
CPR, if required by the *CSSP* or *CSSP Addendum*	5/28/21	verbal	1 hour	Tori Stepaniak

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:SSP, *CSSP Addendum,* and *Self-Management Assessment* to achieve and emonstrate an understanding of the person as unique individual and how to implement ıose plans. Include outcomes, behavior plans, nd any document specific to the person	9.29.21	9.29.21 Verbal	0.5 hours	Tori Stepaniak
ndividual Abuse Prevention Plan to achieve nd demonstrate an understanding of the erson as a unique individual and how to nplement those plans	9.29.21	9.29.21 verbal	0.5 hours	Tori Stepaniak
Medication set up or medic ation dministration training when staff set up or dminister medications. Training also includes pecific medication set up or administration rocedures for the person	9.29.21	9.29.21 verbal and physical	0.5 hours	Tori Stepaniak
The safe and correct operation of medical quipment used by the person to sustain life or ɔ monitor a medical condition that could ecome life threatening. This training must be rovided by a licensed health care professional r manufacturer's representative	9.29.21	9.29.21 verbal and physical	0.5 hours	Tori Stepaniak
Mental health crisis response, de-escalation echniques, and suicide intervention when roviding direct support to a person with a erious mental illness	6.5.20	6.5.20 verbal and physical	3.58 hours	Amber Jensen
Other topics as determined necessary ccording to the person's *Coordinated Service nd Support Plan* or identified by the ompany: Topic: Topic: Topic:	NA	NA	NA	NA

Staff signature

9/29/21
Date

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

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Nya, DPF-025 signature

Final Audit Report 2021-10-04

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STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: Nyaheen Rial
Date of hire: 5/28/20
Date of background study submission: 5/28/21
Date of background study clearance: 5/28/21
Ongoing annual training period: June 2021 - June 2022
Date of first supervised contact: 6/2/20
Date of first unsupervised contact: 6/12/20

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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: Jen S.

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:	9.29.21	9.29.21 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	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
CPR, if required by the *CSSP* or *CSSP Addendum*	5/28/21	verbal	1 hour	Tori Stepaniak

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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	9.29.21	9.29.21 Verbal	0.5 hours	Tori Stepaniak
Individual Abuse Prevention Plan to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans	9.29.21	9.29.21 verbal	0.5 hours	Tori Stepaniak
Medication set up or medic ation administration training when staff set up or administer medications. Training also includes specific medication set up or administration procedures for the person	9.29.21	9.29.21 verbal and physical	0.5 hours	Tori Stepaniak
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	9.29.21	9.29.21 verbal and physical	0.5 hours	Tori Stepaniak
Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness	6.5.20	6.5.20 verbal and physical	3.58 hours	Amber Jensen
Other topics as determined necessary according to the person's *Coordinated Service and Support Plan* or identified by the company: Topic: Topic: Topic:	NA.	NA	NA	NA

Staff signature

9/29/21
Date

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STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: Nyghoeh Rial
Date of hire: 5/28/20
Date of background study submission: 5/28/21
Date of background study clearance: 5/28/21
Ongoing annual training period: June 2021 - June 2022
Date of first supervised contact: 6/2/20
Date of first unsupervised contact: 6/12/20

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: Katie H.

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:	9.29.21	9.29.21 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	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	9.29.21	9.29.21 verbal	1 hour	Tori Stepaniak
CPR, if required by the *CSSP* or *CSSP Addendum*	5/28/21	verbal	1 hour	Tori Stepaniak

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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	9.29.21	9.29.21 Verbal	0.5 hours	Tori Stepaniak
Individual Abuse Prevention Plan to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans	9.29.21	9.29.21 verbal	0.5 hours	Tori Stepaniak
Medication set up or medic ation administration training when staff set up or administer medications. Training also includes specific medication set up or administration procedures for the person	9.29.21	9.29.21 verbal and physical	0.5 hours	Tori Stepaniak
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	9.29.21	9.29.21 verbal and physical	0.5 hours	Tori Stepaniak
Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness	6.5.20	6.5.20 verbal and physical	3.58 hours	Amber Jensen
Other topics as determined necessary according to the person's *Coordinated Service and Support Plan* or identified by the company: Topic: Topic: Topic:	NA.	NA	NA	NA

Staff signature

Date 9/29/21

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