

STAFF ORIENTATION AND ANNUAL TRAINING PLAN - PERSON SPECIFIC

Staff name: *Beto Aledo*
Date of background study submission: *10-19-23*
Ongoing annual training period: *10/2024*
Date of first supervised contact: *11-16-23*
Date of hire: *10-19-23*
Date of background study clearance: *10-19-23*
Date of first unsupervised contact: *11-10-23*

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: *Sarah Renee*

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:	<i>11-16-23</i>	<i>Verbal</i>	<i>5hrs</i>	<i>Liban Abib Physixus inc</i>
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	<i>11-16-23</i>	<i>Verbal</i>	<i>5hrs</i>	<i>Liban Abib Physixus inc</i>
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	<i>11-16-23</i>	<i>Verbal</i>	<i>5hrs</i>	<i>Liban Abib Physixus inc</i>
CPR, if required by the CSSP or CSSP Addendum	<i>NA</i>	<i>NA</i>	<i>NA</i>	<i>NA</i>

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	11-16-23	Verbal	Gms	Liban Abib Phyxus inc
Individual Abuse Prevention Plan to achieve and demonstrate an understanding of the person as a unique individual and how to implement those plans	11-16-23	Verbal	Gms	Liban Abib Phyxus inc
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	11-16-23	Verbal	Gms	Liban Abib Phyxus inc
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	11-16-23 NA	Verbal NA	NA	NA
Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness	11-16-23	Verbal	Gms	Liban Abib Phyxus inc
Other topics as determined necessary according to the person's Coordinated Service and Support Plan or identified by the company: Topic: Topic: Topic:	11-16-23	Verbal	Gms	Liban Abib Phyxus inc

11/16/23

Date

Staff signature: 

*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

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Date of hire: 10-19-23
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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: Kate Hows

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:	11-16-23	Verbal	6hrs	Liban Abib Purxius inc
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	11-16-23	Verbal	6hrs	Liban Abib Purxius inc
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	11-16-23	Verbal	6hrs	Liban Abib Purxius inc
CPR, if required by the CSSP or CSSP Addendum	NA	NA	NA	NA

<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>11-16-23</p>	<p>Verbal</p>	<p>Slurs</p>	<p>Liban Abib Phyxus inc</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>11-16-23</p>	<p>Verbal</p>	<p>Slurs</p>	<p>Liban Abib Phyxus inc</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>11-16-23</p>	<p>Verbal</p>	<p>Slurs</p>	<p>Liban Abib Phyxus inc</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>11-16-23 NA</p>	<p>Verbal NA</p>	<p>NA</p>	<p>NA</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>11-16-23</p>	<p>Verbal</p>	<p>Slurs</p>	<p>Liban Abib Phyxus inc</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>11-16-23</p>	<p>Verbal</p>	<p>Slurs</p>	<p>Liban Abib Phyxus inc</p>

Date 11/16/23

Staff signature 

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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 Stojewicz

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:	11-16-23	Verbal	5 hrs	Liban Abib Physixus inc
*Understanding of what constitutes a healthy diet according to data from the CDC and the skills necessary to prepare that diet	11-16-23	Verbal	5 hrs	Liban Abib Physixus inc
*Skills necessary to provide appropriate support in instrumental activities of daily living (IADLs) per 256B.0659-specify:	11-16-23	Verbal	5 hrs	Liban Abib Physixus inc
CPR, if required by the CSSP or CSSP Addendum	NA	NA	NA	NA

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	11-16-23	Verbal	Slms	Liban Abib Phyxus inc
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Mental health crisis response, de-escalation techniques, and suicide intervention when providing direct support to a person with a serious mental illness	11-16-23	Verbal	Slms	Liban Abib Phyxus inc
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