ANNUAL UPDATE TRAINING

	Direct Support STAFF NAME:
TO THE PERSON NAMED IN COLUMN TO THE	DATE of Hire:

Training		NUMBER OF	SUPERVISORS SIGNATURE / STAFF
Date		HOURS	SIGNATURE*UPON COMPLETION OF
Jan	Incident Reports- Critical Incidents		
	Recipient Rights Reporting		
Feb	Compliance/Deficit Reduction Act/ Medicaid Fraud		!
	PHI / HIPAA/ Privacy Law (IMP)	_	•
March	Severe Weather / Tornado Safety		
	Licensing Record Clearance & Health Attestation Forms		
April	OSHA / SDS & Right-to-Know Requirements Cyber Security		
Мау	Medication Administration		
June	Culture of Gentleness / Cultural Competency (IMP)		
	Code of Ethics *STRC & CMH*		
July	Active Shooter / Bomb Threat / Workplace Violence		
Aug	Emergency Disaster Response Plan (Shelter-in-Place) Fire Safety/ Evacuation Plan BBP/ IC (IMP)		
Sept	Physical-Mental-Sexual Abuse Policies / Suicide Prevention / Professional Boundaries		
Oct	Winter Driving / Vehicle Accident Policy / Snowblower Safety		
Nov	QI Metrix Review / Person Centered Planning		
DEC	Make UP month for missed training	aining	