

DDSD REQUIRED TRAINING – FAMILY LIVING/CUSTOMIZED IN-HOME SUPPORTS PROVIDERS

NOTE: At least 40 hours of training is required during the first year; at least 10 hours is required each year thereafter.

Direct Support Staff Name _____
Start Date _____

Individual's Name _____

Service Coordinator: _____

Agency Requirements
(before contracting with Alta
Mira)

HR	Date Completed
DOH	
COR	
Transportation Manual Agreement	

Pre-Contract Level
(prior to signing contract)

Course Name	Date Completed	Date Scheduled
Orientation		
Initial Individual Specific Training (IST)		
First Aid/CPR (must include Adult, Child AND Infant CPR)		
DHI-ANE: Recognizing & Reporting ANE		
Handle with Care (if required by PBSP)		
Aspiration Management Update		
Person-Centered Planning Update - if PCP taken before July 2008		

Pre-Service Level
(within 30 days of contract)

Course Name	Date Completed	Date Scheduled
Pre-Service		
Foundations for Health & Wellness		

Orientation Level
(within 90 days of contract)

Course Name	Date Completed	Date Scheduled
Person-Centered Planning (ISP) One-Day		
Assisting with Medication Delivery (AWMD)		
AWMD Cross-Over (if applicable)		

Level One Training
(within 1 year of contract)

Course Name	Date Completed	Date Scheduled
Participatory Communication and Choice-Making (PCCM)		
Advocacy 101		
Positive Behavior Support Strategies		
Teaching and Support Strategies		

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