TN Department of
Intellectual &
Developmental Disabilities

Independent Coordination/Case Manager Training Verification
for

_____
(ISC or Case Manager PRINTED Name)

It is the responsibility of the ISC/CM to have the trainer complete and sign this form noting each topic or module attended. When all topics/modules are completed a certification date will be issued by the last trainer providing the final topic/module. This completed document is to be filed in the ISC/CM training file along with a certification issued by TN Department of Intellectual and Developmental Disabilities.

Topic/Module Name & Due Date	Date Completed & Web-based or Classroom	Trainer (PRINT)	Trainer Signature Completion Verified by:
TNDIDD Protection from Harm *(30 days of DOH)*	web-based		
People with Disabilities Building Relationships & Community Memberships *(30 days of DOH)*	web-based		
TNDIDD Standard Precautions *(30 days of DOH & annual requirement)*	web-based		
HIPAA Overview *(30 days of DOH & annual requirement)*	web-based		
TNDIDD Title VI Course (Rev) *(30 days of DOH & annual Requirement)*	web-based		
Abuse and neglect of Individuals with I/DD *(30 days of DOH & annual requirement)*	web-based		
Infection Control: The Basics *(30 days of DOH & annual requirement)*	web-based		
Person Centered Thinking *(120 days of DOH-2 days)*	classroom		
Person Centered ISP Training *(120 days of DOH-includes Outcomes & Action Steps component- 2 Days)*	classroom		
Service Review, Appeals and Disenrollment *(120 days of DOH)*	classroom		
TNDIDD Assessments *(120 days of DOH-web based)*	web-based		
TNDIDD TNCare Waiver *(120 days of DOH-web based)*	web-based		

TN Department of Intellectual and Developmental Services verifies that all training topics have been provided and reflects a completion date of _____ (Date).

Completion verified by_____ (DIDD Trainer).

December 29, 2017