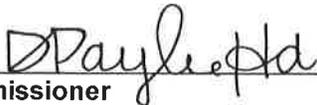


	POLICIES AND PROCEDURES State of Tennessee Department of Intellectual and Developmental Disabilities	Policy #: Policy 100.1.15	Page 1 of 3
Policy Type: Intermediate Care Facilities for Individuals with Intellectual Disabilities		Effective Date: December 15, 2015	
Approved by:  Commissioner		Supersedes: Policy 100.1.15 dated November 27, 2012 Last Review or Revision: Reviewed August 2014, Revised May 14, 2015	
Subject: STAFF DEVELOPMENT			

- I. **AUTHORITY:** Tennessee Code Annotated (TCA) 4-3-2708, T.C.A 71-5-105(12)(b), Section 1905 (d) of the Social Security Act, and 42 CFR 483.420, 33-1-302, TCA 33-1-303, TCA 33-1-103
- II. **PURPOSE:** The purpose of this policy is to address requirements for staff development in order to provide safe and person centered supports for persons supported in the Department of Intellectual and Developmental Disabilities (DIDD) Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs – IID) and the Day One ICF/IID Unit at the Harold Jordan Center (HJC).
- III. **APPLICATION:** This policy is applicable to employees, contract employees and volunteers who provide services and supports to persons supported in DIDD ICFs/IID and the Day One ICF/IID Unit at HJC.
- IV. **DEFINITION:**

Inter-departmental shall mean any transfer of staff between departments in the DIDD ICF/IID and the Day One ICF/IID unit at HJC.
- V. **POLICY:** All DIDD ICFs/IID providers and the Day One ICF/IID Unit at HJC shall guarantee staff has the training to ensure safe, effective and efficient supports for persons supported. A wide array of staff development opportunities shall be offered to achieve a balance between person centered practices, health and safety, and effective utilization of resources.
- VI. **PROCEDURES:**
 - A. There are two (2) phases of training which shall be successfully completed by staff within sixty (60) days of employment as outlined in the staff development plan approved by the central office director of staff development and DIDD ICF/IID staff development. (See DIDD ICF/IID or regional staff development plan).
 1. Standardized training requirements and specified curricula shall be approved by the Central Office staff and DIDD ICF/IID staff development.
 2. The first phase shall be completed prior to the staff person assuming full responsibility for providing direct supports to persons supported.
 3. The second phase shall be completed within sixty (60) days of initial employment.

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4. Any staff person in the DIDD ICF/IID or Day One Unit at HJC successfully completing training prior to an inter-departmental transfer shall have training validated by a staff development transcript.
- B.** Based on responsibilities of staff, courses shall be assigned which enable him/her to perform duties effectively, efficiently and competently. (See provider or regional staff development plan).
1. Standardized training requirements and curricula provided by DIDD training department and subject matter experts for staff providing support shall be maintained by the local and/or regional staff development office.
 2. These specialized curricula shall be based on specific job duties.
 3. Training shall be provided through web-based learning, classroom and/or one-on-one instruction.
 4. Individual specific training, including the active treatment needs of each person supported, shall be provided by designated instructors or designees.
- C.** Training courses shall be competency based.
1. Competency means the learner has been deemed qualified or capable of demonstrating knowledge or skill in the area being taught.
 2. Competency of staff can be demonstrated in two ways: written tests or evaluations and demonstration of skill acquisition.
 - a. When using a test or evaluation, a score of at least eighty percent (80%) shall be required to confirm successful completion or competency.
 - b. To verify competency using demonstration of skill acquisition (e.g. CPR, behavior support management), the designated instructor or designee shall observe the learner performing the expected task or behavior to verify competency.
- D.** Certifications and Re-certifications
1. Certification and/or recertification of Cardiopulmonary Resuscitation (CPR) and First Aid shall be obtained from a certified and approved entity or trainer using a classroom format as outlined in the DIDD ICF/IID or regional staff development plan.
 - a. A classroom format utilizing hands on skills as outlined in the DIDD ICF/IID or regional staff development plan shall be used.
 - b. Direct support staff shall not work alone with persons supported without proof of current certification in CPR and First Aid.
 2. ICFs/IID supporting persons with significant behavioral challenges may also require staff to have certification and/or recertification in specialized behavioral interventions (e.g. PCM, CPI, MANDT) as outlined in the DIDD ICF/IID or regional staff development plan.

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- a. A classroom format utilizing hands on skills as outlined in the DIDD ICF/IID or regional staff development plan shall be used.
- b. Direct support staff shall not work alone with persons supported without proof of current certification in these interventions.

E. After reasonable attempts to complete training or demonstrate competency have failed, corrective measures shall be initiated, which could include disciplinary actions.

F. Continuing Training

1. The need for additional training or staff development opportunities shall be reviewed and addressed annually by staff at the local staff development office.
2. Staff may request or a supervisor may require an employee to complete additional training courses.

G. Volunteers and Students

1. Although volunteers and students work in a non-pay status and are not considered in calculating facility staffing ratios, they shall receive all necessary training.
2. Training shall be directed toward the type of support to be provided.
3. Training on abuse, neglect, and exploitation prevention and HIPAA shall be required for volunteers and students. As part of the HIPAA training, volunteers and students shall be required to sign a confidentiality document.

VII. CQL STANDARDS: N/A

VIII. REVISION HISTORY: May 15, 2015

IX. TENNCARE APPROVAL: N/A

X. ATTACHMENTS: None