



## Training Plan – FY 2019-2020

**WRITTEN BY:** GHS Training Department

**APPROVED BY:** Shawn Edwards, MA, QIDP  
Director of Education and Customer Services

**DATE:** Implemented: 11-2010  
Revised: 06-2011; 01-2012; 03-2012; 09-2013; 06-2014; 06-2015; 01-2016;  
09-2016; 11-2016; 03-2017; 08-2017; 10-2017; 03-2018; 05-18; 10-2018; 10-2019

### I. INTRODUCTION

This plan reflects a listing of training requirements outlined in the current QAPIP, MDHHS, GHS policy manual, and Federal requirements. It is not topically exhaustive, but does capture all areas essential to conformance with standards.

### II. GENERAL INFORMATION

Regardless of the type of training, the following general requirements apply:

- A. To register for a class or training, staff must sign up via the OPSC or on the Genesee Health System (GHS) intranet. If an individual from the provider network does not have OPSC access, a secretary or supervisor who has access may register the individual. Alternatively, to request access to the OPSC, staff should forward a completed Computer Acceptable Use Agreement (CAUA) form via fax to Provider Relations at (810) 496-5770.
- B. All newly hired GHS staff will receive a training reminder during New Employee Orientation. Training notification for GHS staff and network providers is sent out via email. Network Providers are responsible for ensuring that GHS has their correct email, fax number, and U.S. Mail address. Providers are responsible for monitoring their own training needs and must ensure that their staff adheres to all training requirements. GHS Quality Management will audit for compliance.
- C. Periodic assessments of training needs are conducted annually through Provider Relations for the Provider Network. These assessments include suggestions for in-services and trainings beneficial to the population served. GHS staff are surveyed once per year on training needs. The Training Department will review all requests and make recommendations for the upcoming year's training offerings.
- D. There may be a cost for trainings that are offered through GHS for the Provider Network. When required, the price is clearly noted on the OPSC and will show when staff are registered. Registration fees will be based on whether the classes contain Continuing Education credits and/or contact hours from the Michigan Certification Board for Addiction Professionals (MCBAP), as well as the standard material costs of the class. Providers and/or attendees will be expected to pay the required amount 72 hours prior to the start of the class or their registration will be cancelled.

E. Registration fees are payable to:

Genesee Health System  
Attn: Accounts Payable Re: (***please specify training***)  
420 W. 5<sup>th</sup> Ave. (2<sup>nd</sup> floor annex)  
Flint, Michigan 48503

Please bring receipt of payment to Training on day of training session. Classes cancelled without 48 hours' notice will not receive a refund.

F. Some trainings are recorded and may be viewed at GHS. Contact the Training Department at (810) 762-5280 or email [training@genhs.org](mailto:training@genhs.org) to schedule a viewing.

### III. REQUIREMENTS/EXPECTATIONS

#### A. All Staff

The trainings listed below are required of ALL staff in ALL programs serving individuals with mental illness and/or developmental disabilities.

1. New Employee Orientation

Takes place the first full week of every other month. GHS Staff only. For a complete list of courses, contact the Training Department.

2. Rights of Persons Served

**Live training required by GHS Office of Recipient Rights within first 30 days of hire, then annually via GHS Annual Compliance DVD/online training. For out of county providers, any alternative CMH Recipient Rights training must be approved by GHS Office of Recipient Rights in advance.**

3. Annual Compliance Training

Annual Compliance Training is required annually for all GHS staff, or staff employed by a GHS contracted provider of mental health and/or developmental disabilities services.

This annual training is available on DVD and offered online on the OPSC or intranet. For FY 2019, this training includes the following components:

<b>ANNUAL COMPLIANCE TRAINING</b>
Corporate Compliance
Critical Incident Reporting
HIPAA
Limited English Proficiency (LEP)
Person / Family Centered Planning
Recipient Rights
Welcoming and Customer Service
<i>Health and Safety – GHS staff only</i>
<i>Media and Communications – GHS staff only</i>

4. Universal Precautions

Not offered by GHS to the Provider Network, but required annually of all staff.

5. Medical Emergency Training (GHS staff only)

GHS requires that all staff in departments that serve clients directly be trained in CPR. GHS uses the American Heart Association curriculum, and renewals are due every other year. Red Cross training is also accepted – clinicians are to submit copies of their certificates to the Training Department for tracking.

6. Non-violent Crisis Prevention

Crisis Prevention Institute® (CPI) training is required annually for all GHS staff who work directly with consumers.

CPI Principles training is required bi-annually for GHS staff who do not work directly with consumers.

7. Cultural Competence

Cultural Competence education is offered to all New Employees and is an annual requirement for all employees. See GHS Cultural Competency & Diversity Plan for additional information.

B. Primary Clinician

The following classes are required of ALL clinical staff (defined as those responsible for the Plan of Service) in ALL programs serving individuals with mental illness and/or developmental disabilities.

a. Primary Clinician Training

Each year, we offer current trends and topics for our clinicians to be abreast of newest and most current research for appropriate application when working with people.

C. Clinical Services – MI, ID-DD

1. Clinical Process Training MI, ID-DD

This training is designed to assist in understanding the professional development for clinical staff for Case Managers and Supports Coordinators. Training takes place every opposite month of New Employee Orientation. GHS staff only. For a complete list of components, contact the Training Department.

2. LOCUS P.A.S. (Level Of Care Utilization System for Psych and Addiction Services Training)

A clinically reliable and valid decision support tool for determining appropriate level of care, capable of measuring client needs over time.

a. All Primary Clinicians, Intake Staff and Therapists working with persons with a severe and persistent mental illness over the age of 18 are required to be trained in LOCUS P.A.S.

b. Trainings will be conducted by certified trainers in LOCUS P.A.S. within 6 months of hire.

C. Direct Care Worker

ALL direct care workers (defined as those providing services in Residential, CLS, CLS with Med Drop, Independent Living, Respite settings, and Day-Work program settings) in ALL programs serving individuals with mental illness and/or developmental disabilities are required to complete the Direct Care Worker Requirements listed on page 7.

Employees of these programs are required to have this training within the first 30 days of hire. These standards will be audited by GHS's Quality Management Department Provider Network Reviewer. Please refer to page 7 of this document for a list of required DCW training modules.

- a. When hiring employees who have already completed the requisite training, the program/home will maintain evidence of completion within their respective agencies. Toolbox trainings are not transferable between agencies or between homes of the same agency.
- b. All home/day program managers and assistant home/day program managers must attend annual food texture training. All staff must be in-serviced annually. Caregivers providing visits or meals outside of the program must view the Food Texture Modification DVD and understand food preparation for the consumer if applicable.
- c. If the program/home hires an employee who has been out of the direct care field for two years or more, the employee must repeat the entire course of trainings or take and pass the competency-based tests.
- d. Individual training records for all staff must be kept in the program. Tests must include score. These records must be produced for audit.
- e. All classes must be passed with at least an 80% score, other than Medications which requires an 86% score.

1. Trainers/Training Plans

**All providers are required to submit current training plans** (DCW/Toolbox) to GHS. Please log into OPSC <https://opsc.genhs.org/> Click on the "Data Entry Gateway or DEG link. Once you are logged into the DEG, select upload files and select Residential Training Plan (*you must name the document with your corporation name and the year i.e. Angels 2018.*) Browse to the file and select Upload. You will be given an uploaded file confirmation id for future reference. If you don't have access to the DEG, please submit a help ticket on the OPSC or call 810-4965000. Plans must be submitted annually by October 31<sup>st</sup>. *A training plan outline template is available on the OPSC if needed.*

- a. Each program/home will make training available via its own trained trainer, or in agreement with GHS's approved trainer/agency.
  - The trainer must be train-the-trainer certified or trained in adult learning theory through DCH or GHS approved training course. GHS will offer a train-the-trainer course as needed.
  - The trainer must be approved through GHS's Training Department.
  - All trainers will pass an annual certification exam with a score of 80%.
- b. This plan should include a schedule of the program/home's periodic refresher training of DCW modules (e.g., medications, environmental emergencies, implementing relapse/crisis plans, non-violent crisis prevention and therapeutic intervention). In addition, the program/home should describe their plan for providing any population specific training to address specific issues (e.g., diabetes, special diets, behavioral issues, food preparation) fundamental to providing quality care to intended consumers. All trainings must include competency-based tests, inclusive of the staff name, date the test was taken, the topic reviewed, test questions/answers and the final grade. Any change in the plan must be approved through the GHS Training Department. The program/home must also inform the

Training Department if they have a change in trainers. Failure to do so will result in sanctioning.

- c. The corporation will send at least one trainer to each quarterly Trainer meeting. This representative will update the other trainers on topics covered in the meeting.

## 2. IPOS Training Format for Staff Providing Direct Services

- a. Case Manager/Supports Coordinators will ensure that training over the entire plan of service occurs with staff who are to carry out the plan or parts of the plan prior to the start date of the IPOS. Case Managers/Supports Coordinator will complete training on portions of the plan either directly authored by their CM/SC or falling within their professional scope, and not portions of the IPOS authored by consultative staff. Consultative Staff that have written or have professional oversight of treatment plans for the individual must also train prior to implementation, preferably by the individual that wrote the plan.
- b. A hard copy of the most recent IPOS will be maintained at the day program and specialized residential programs. Upon completion of IPOS training, Specialized Residential staff and Day Program staff will sign and date the front page of the IPOS (often located in the program floor book) and the Primary Clinician/Consultant Training Documentation Form. The Training Documentation Form is found in CHIP. If signature is illegible, staff will also print their name next to signature.
- c. CLS and Respite staff will sign the Primary Clinician/Consultant Training Documentation Form. The clinician will ensure that the original is scanned into the electronic medical record and that a copy has been forwarded to the Provider Agency for CLS or Respite. If signature is illegible, staff will also print their name next to signature.
- d. The home manager or program manager are able to provide ongoing training to the staff they supervise or any new staff hired as long as they were trained by the CM/SC and Consultative Staff directly on the IPOS. Staff are to sign and date as evidence of the training as specified above prior to providing services to an individual.
- e. Specialized Residential programs and Day programs are to have regular monthly meetings to allow the training to be scheduled unless it is an emergent placement. For an emergent placement, training is to happen the day of placement for any significant challenging behaviors or health issues, all other portions within three days.
- f. Evidence of training must be kept on site and will be audited by the GHS Quality Management Department.

## IV. OTHER TRAININGS

### A. Speakers Bureau

GHS will provide a Speaker Bureau for the community and will fulfill as many requests as possible.

- Speakers will be recruited according to content requested.
- Marketing is done via brochures and mailings.
- Coordinated through Customer Services at (810) 257-3705

B. Mental Health First Aid

GHS will offer Mental Health First Aid to the Community. This is an 8 hour course that provides 6 (six) social work CEU's. Courses available are:

- Youth
- Adult
  - Older Adults
  - Veteran
  - Higher Education
  - Law Enforcement, Corrections and Public Safety

C. QPR (Question Persuade Refer) Suicide Prevention Gatekeeper Program

D. Other Trainings

Please note that all trainings that are provided may not be listed in the training plan. These are trainings that may not be incorporated in the training plan, but will be posted at the time of offering via flyer, email, or other form of notification. If the specified training is offered to the external provider, it will be listed on the OPSC. Otherwise all trainings will be posted in a timely manner for staff registration. This may include but not limited to: new initiatives, conference offerings, licensure requirements etc.

V. **DEVELOPMENT AND EVALUATION**

This policy and its plan will be monitored by the Training Department.

VI. **TRAINING**

It is the responsibility of management staff in all programs to ensure that all staff persons are trained regarding the expectations in this plan.

Each GHS employee has an electronic training record that keeps track of their trainings that are required, elective or annual GHS updates. It is the responsibility of each employee to submit outside training certificates to the training department for record keeping and data entry. All outside trainings must be submitted on the proper form for appropriate credentialing. *The External Training Request Form is located on the Intranet/Forms.*

VII. **DEFINITIONS**

Provider Network: A network of behavioral health providers operating in Genesee Health System (GHS) Service Network to provide mental health treatment.

## GENESEE HEALTH SYSTEM TRAINING REQUIREMENTS

### Clinical Service Providers

Required Training	GHS STAFF	Network Providers		Frequency	Must come through GHS training	Network Providers receive this training from other sources
		CLINICAL STAFF	CLERICAL STAFF			
Recipient Rights	X	X	X	<b>Live Training</b> within 30 days of employment, then annually	X	
HIPAA	X	X	X	Within 60 days of employment, then annually	X	X
Ethics	X	X	X	Within 60 days of employment, then annually	X	
Risk Management/ Critical Incident Reporting	X	X	X	Within 60 days of employment, then annually	X	
Customer Services/Welcoming	X			Within 60 days of employment, then annually	X	
Limited English Proficiency (LEP)	X	X	X	Within 60 days of employment, then annually	X	X
Self Determination - Person/Family Centered Planning	X	X		Within 60 days of employment, then annually	X	
Trauma History Screening	X			Within 60 days of employment, then annually	X	
Fire Suppression	X			Annually	X	
Media and Communication	X			Annually	X	
Universal Precautions/Communicable Diseases/BBP	X	X	X	Within 60 days of employment, then annually		X
Therapeutic Interventions (GHS-Crisis Prevention Institute (CPI))	X	X	X	Within 60 days of employment, then annually or as required by job assignment		X <sup>1</sup>
Cultural Competency	X	X	X	Within 60 days of employment, then annually		X
First Aid/CPR for Adults, Children and Infants	X	X	X	Within 60 days of employment, then annually or bi-annually for staff that serve clients directly.		X <sub>1</sub>
Health and Safety	X			Within 60 days of employment	X	
Protective Services	X	X		Within 60 days of employment	GHS Staff	X
Workplace Harassment	X			Within 60 days of employment	X	
Recovery and Relapse Prevention	X	X		Within 60 days of employment	GHS Staff	X
Primary Clinician Training	X	X		Within 60 days of employment	GHS Staff	X

<sup>1</sup> (Specialized Residential, Day/Work Programs, Respite and CLS will follow the DCW training plan)

DIRECT CARE WORKER REQUIREMENTS						
Module		Specialized Residential	Day/Work Program	CLS	CLS with Med Drops	Respite
STATE GUIDELINES	Intro/Role as DCW/Residential Services	X	X			
	Working with People	X	X	X		X
	CPR	X	X	X	X	X
	First Aid	X	X	X	X	X
	Environmental Emergencies	X	X	X		X
	Therapeutic Interventions	X	X	X		X
	Crisis Planning	X	X	X	X	X
	Cultural Competency	X	X	X	X	
	LEP	X	X	X	X	X
	Medications	X	X	X	X	X <sup>2</sup>
	Health	X	X	X	X	X
	Recipient Rights	X	X	X	X	X
	Person-Centered Planning	X	X	X		
	Blood Borne Pathogens/Universal Precautions	X	X	X	X	X
	Nutrition	X				
GHS GUIDELINES	Food Texture Modification (required for Group Home Managers and Assistant Managers)	X	X			
	<b>Annual Compliance</b> <ul style="list-style-type: none"> <li>• Corporate Compliance</li> <li>• Critical Incident Reporting</li> <li>• HIPAA</li> <li>• Limited English Proficiency (LEP)</li> <li>• Person/Family Centered Planning</li> <li>• Recipient Rights</li> <li>• Welcoming and Customer Service</li> </ul>	X <sup>3</sup>	X <sup>3</sup>	X <sup>3</sup>	X <sup>3</sup>	X <sup>3</sup>
	IPOS – Training Format for Staff Providing Direct Services	X	X	X	X	X

<sup>2</sup> Those in unlicensed settings do not pass medications.

<sup>3</sup> All new hires are required to complete **GHS Recipient Rights Live training** within 30 days of hire. Annual Compliance modules are required within 30 days of hire via corporation/home training or GHS Annual Compliance DVD. All staff must have required MDHHS trainings within 30 days of hire.



## GENESEE HEALTH SYSTEM TRAINING REQUIREMENTS

### Temporary/Student Interns/Contract Staff

Required Training	Temporary Employees (less than 1 month)	Student Intern	Grow The Field Interns	Contract Staff		Frequency	Must come through GHS training
				Short Term (3 months or less)	Long Term ABO		
Recipient Rights	X	X	X	X	X	Live training within 30 days, then annually	X
Universal Precautions/Communicable Diseases/BBP	X	X	X	X	X	Within 60 days, then annually	X
Health & Safety/Fire Suppression	X	X		X	X	Within 60 days, then annually	X
Ethics	X	X	X	X	X	Within 60 days, then annually	X
Crisis Prevention Principles	X	X		X		Within 60 days	X
First Aid/CPR for Adults, Children and Infants					X	Within 60 days, then bi-annually for staff that serve clients directly or as required by job assignment.	
Welcome and Overviews			X		X	Within 60 days	X
HIPAA	X	X	X	X	X	Within 60 days, then annually	X
Cultural Competency					X	Within 60 days, then annually	X
Work Place Harassment			X		X	Within 60 days	X
Limited English Proficiency (LEP)					X	Within 60 days, then annually	X
Customer Services/Welcoming					X	Within 60 days, then annually	X
Therapeutic Interventions (GHS-Crisis Prevention Institute (CPI®))					X	Within 60 days, then annually or biannually as required by job assignment	
Risk Management/Critical Incident Reporting					X	Within 60 days, then annually	X
Intranet and Computer Usage					X	Within 60 days	X
Protective Services					X	Within 60 days as required by job assignment	X
Recovery and Relapse Prevention					X	Within 60 days as required by job assignment	X
Self Determination					X	Within 60 days as required by job assignment	X
MyStrength					X	Within 60 days as required by job assignment	X
Trauma History Screening					X	Within 60 days as required by job assignment	X