



**Macomb County Community Mental Health
Self-Determination Employee Training Tracking**

Refer to [SD Direct Employment Training Grid](#) for training details

Staff Name: _____

Date of Hire: _____

| REQUIRED TRAINING: | INITIAL TRAINING DUE BY: | DATE OF INITIAL TRAINING: | REPEAT TRAINING DUE BY: | DATE OF REPEAT TRAINING: |
|--|---------------------------------|----------------------------------|--------------------------------|---------------------------------|
| Bloodborne Pathogens / Universal Precautions/ Infection Control * Required (RAPID TRAINING) | | | | |
| Person-Centered Planning-IPOS Plan Goals and Objectives *Required (RAPID TRAINING) | | | | |
| Emergency Preparedness *Required if working w/SED or CW Waiver (RAPID TRAINING) | | | | |
| Basic First Aid *Required | | | | |
| Recipient Rights *Required | | | | |
| Behavior Treatment Plan Specific to Person * (Required if plan exists) | | | | |
| Corporate Compliance/ HIPAA (Strongly Encouraged) | | | | |
| CPR (Strongly Encouraged) | | | | |
| Cultural Competency (Strongly Encouraged) | | | | |
| Grievances and Appeals (Strongly Encouraged) | | | | |
| Limited English Proficiency (Strongly Encouraged) | | | | |
| Trauma-Informed Care (Strongly Encouraged) | | | | |
| Other per IPOS (if any): _____ _____ | | | | |

***Required Trainings** within 30 days of hire. **RAPID TRAINING** completed prior to billable services delivered. Employers are responsible for ensuring that hired staff remain compliant with initial and repeat training timeframes. Staff missing training risk not being paid.