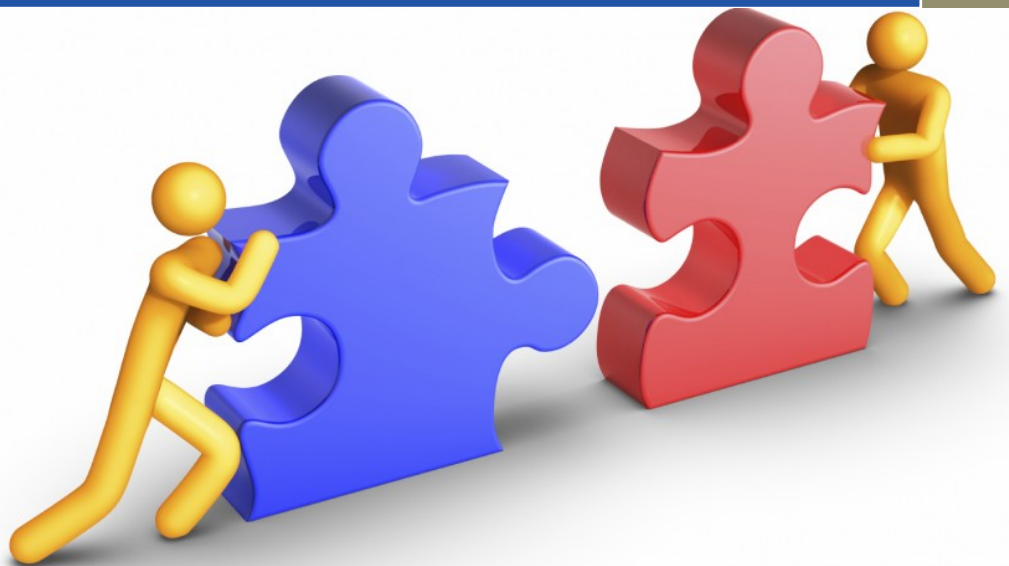


Training Reciprocity Implementation Plan

(for Direct Care staff)



Training Reciprocity Wkgrp
2018

VERSION HISTORY

Version (Revision Dt)	Implemented By	Approval Date	Reason (Added, Changed, Removed)
6.28.18	Rik Rambo	6.28.18	Added: <ul style="list-style-type: none"> • “for Direct Care staff” to title on cover page to ensure clarity regarding audience of training reciprocity plan • “Direct Care Staff” to Appendix B Training/ Curriculum Grid title
6.11.18	Rik Rambo	6.12.18	Added: Version (date) to cover page Changed: <ul style="list-style-type: none"> • Implementation Timeline changed to go through April, 2019 • Step 1, section (2)(a) changed to (2)(b) • Step 1, section (2)(c)(i)&(ii) merged with 2(b) • Step 1, section (2)(c)(iii) changed to section (3) • Updated Appendix A - D Added: <ul style="list-style-type: none"> • Step 1, new section (2)(a) added to ensure review of any training (transcripts, certifications, etc) not recorded on IMP website • Step 1, section (3) added (3)(e) – “no additional training is required” • Step 4, added verbiage for clarification • Step 5, added section (4) – “*Recommended: Verify ability to perform job function(s)”

Training Reciprocity Implementation Plan

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Rationale

Per Attachment P7.3.1.1 of the MDHHS/PIHP Master Contract, MDHHS requires that each PIHP system incorporate reciprocity efforts to promote system efficiencies at all levels of service delivery and management. For mandatory required training, each responsible organization must have reasonable provisions for facilitating the acceptance of validated training—and where possible if indicated, offering expedited alternatives—for individuals for whom relevant, comparable training was provided by similar systems or sources.

PIHPs involved in the Michigan community mental health and substance use disorder programs have finite resources to either conduct various network management functions—including training—or to create or accept alternatives that will fully meet mandatory training requirements as found in MDHHS/PIHP Master Contract, and STGW Training/Curriculum Grid (Appendix B). Therefore, MDHHS expects that each PIHP and their service provider networks throughout the state demonstrate internal and external reciprocity efforts, or ensure expedited alternative processes are available where relevant provider differences occur.

Audience

Direct Care staff are initial primary training ‘target’. The Training Reciprocity workgroup must identify required training and the requisites for each training (e.g., objectives, expected outcomes, etc.); recommend a process for establishing criteria for training to be eligible for reciprocity and identify how that criteria gets approved; and, identify documentation required for testing (e.g., records, testing, etc.).

Process development

The following groups were involved in developing the Training Reciprocity package:

Training Reciprocity Workgroup (TRW) – established by the PIHP/CEO group in 2016; includes representatives from each Region; tasked with developing a Training Reciprocity process as required by MDHHS/PIHP master agreement.

State Training Guidelines Workgroup (STGW) – established by MACMHB in 2007; comprised of representatives from across the state including PIHPs, CMHSPs, MDHHS, and other stakeholders; tasked with developing training Guidelines (standards) for support staff.

www.ImprovingMIpractices.org (IMP) – a ‘cooperative venture’ overseen by MDHHS, BHDDA, and CMHAM designed for BH professionals to share knowledge, participate in free training, and earn CEU’s; provides free online access to over 60 credit-bearing courses, along with hundreds of additional courses, videos and resources; currently has over 16,850 registered users across the state.

Scope (Reciprocity assurance)

Training Reciprocity requires, if not standardized training, then standardized expectations for training. Standardized training would be ideal though not realistic because many organizations and providers have invested great resource into their staff development programs. Therefore, training reciprocity will be achieved through compliance with standards established to guide curriculum development. These criteria are spelled out in Guidelines developed by STGW. Each training requirement for a direct care worker has an associated Guideline that establishes training expectations for a specific topic, to include required content, expected outcomes, recommended outline, trainer qualifications, format for the training, frequency, etcetera.

Reciprocity is an effort that requires everyone to do their part. Once fully implemented, every organization/provider entity will be asked to attest that any training from that point on, whether initial or refresher, will be 'vetted' (i.e., compared) against all Guideline criteria for that training requirement. In other words, regardless of the training program, application, or platform utilized, it must compare with the standard, or it cannot be considered for reciprocity.

Process Development Detailed Timeline

Phase Tasks, Milestones and/or Deliverables	Start Date	End Date	Responsible Role
2.1 – Develop Guidelines	Complete	As needed	STGW
2.2 – Finalize ‘Vetting’ Tool	Complete	Complete	STGW
2.2a – Develop Training for ‘Vetting’ Tool	2/19/18	6/1/18	STGW
2.3 – Identify PIHP/CMHSP/Designee Reciprocity leads/IMP managers	6/18/18	7/27/18	PIHP
2.3a – Provide ‘Vetting’ Tool training	7/30/18	8/24/18	STGW
2.4 – Pilot / Test Phase	8/27/18	9/14/18	STGW TRW PIHP
2.5 – Vet ‘Outside’ Curricula	8/27/18	Before Use	PIHP
2.6 – Vet Curricula already available on IMP	3/5/18	7/27/18	STGW
2.7 – Develop ‘Auditing’ Tool (from 2.2 above)	4/30/18	9/28/18	STGW
2.7a – Audit Vetted Curricula (from 2.5 above)	10/1/18	As needed	STGW
2.8 – Add Audited Curricula to IMP Library	As needed	As needed	IMP
3.1 – Develop Process to Document Training	Complete	Complete	IMP
4.1 – Develop Questions (from GL’s in 2.1 above)	Ongoing	8/27/18	STGW
4.2 – Develop Process to ‘Host’ Questions	Complete	Complete	IMP
5.1 – ‘Host’ Test on IMP	Complete	Complete	IMP
6.1 – Develop Process to Update Transcript	Complete	Complete	IMP
6.2 – Update Transcript on IMP	Complete	Complete	IMP

*Key (**IMP**=ImprovingMIpractices/State; **PIHP**=PIHP/CMHSP Designee; Direct Care Staff;
STGW=State Training Guidelines Workgroup; **TRW** = Training Reciprocity Workgroup)

Implementation Timeline: Training Implementation and Management

Step	Jun '18	Jul '18	Aug '18	Sep '18	...Apr '19
i. Receive approval for TR Implementation	PIHP CEOs				
ii. Identify Reciprocity Leads/IMP Managers					
iii. Train Reciprocity Leads/IMP Managers					
1. Identify Training Rqmts for Position (p. 7)					
2. Check Availability of Vetted Training (p. 8)					
3. Provide/Attest to Training (p. 9)					
4. Ensure Availability of Competency Test (p. 10)					
5. Test Competence (p. 10)					
6. Document Training (p. 11)					

Training Management

Regardless of how PIHP/CMHSP 'System' provides new/refresher training to Direct Care staff, Reciprocity requires all training/refresher training first be 'vetted' against STGW Guidelines, with evidence of training provided prior to testing for competency. Additionally, though Training Reciprocity workgroup does not recommend that utilization of www.ImprovingMiPractices.org (IMP) be made mandatory, we do recommend that each PIHP/CMHSP system: 1) register with IMP; 2) explain the benefits of IMP to their Providers (free staff development opportunities, etc.); 3) explain the benefits to their employees/direct care workers (for individual development, for maintaining training transcripts, and for ease of transferring to another agency should the need arise); and, 4) be prepared to utilize IMP 'Management' portal to access Guidelines (for 'vetting' curriculum), to verify training, and to schedule competency testing as needed.

Register organization with ImprovingMIpractices

Each organization only needs to do this once.

1. Identify **IMP manager(s)** that will manage IMP training accounts for your organization
2. If IMP manager(s) do not already have a user account set up on improvingMIpractices website:
 - a. Have IMP manager(s) Go to www.improvingMIpractices.org

- b. Click on <**Create a New Account**> in upper right corner of the screen below the <GO> button. This takes you to a “Welcome to ImprovingMIPractices!” screen
 - c. Enter the requested ‘PROFILE DETAILS’ and ‘USER DETAILS’ information, and then click on <**Create my new account**> button in lower left corner of the screen.
3. Call IMP technical support to setup your company profile:
 - a. Call **(517) 940-8813** between 9am-12pm and ask them to set up your company as a training site. Be prepared to provide name(s) of IMP manager(s)
 - b. IMP technical support can setup a new user account for your company’s IMP manager(s) if your identified IMP manager(s) have not already done so

Step 1 - Identify Training Requirements for position

1. Gaining **PIHP/CMHSP/Provider Designee** identifies training requirements for new staff member based on work setting (e.g., Specialized Residential Home, General AFC Home) or PCP/Assessment Plan needs, utilizing/comparing against STGW Training/Curriculum Grid (see Appendix B) as found on IMP website (www.improvingmipractices.org), under ‘Advisory Groups’ (scroll down page), click on <**Statewide Training Guidelines Work-group (STGW)**> to access.
2. Validate previous training/experience
 - a. **PIHP/CMHSP/Provider Designee** collect any previous training transcripts, certifications, etcetera
 - i. Review collected documents to identify courses completed, and which (if any) fulfill training requirements identified in **Step 1(1)** above.
 - ii. *Recommended: Ensure previous training received satisfies all requirements as identified on STGW Guidelines (see Appendix C for example Guideline) specific to those training requirements identified in **Step 1(1)** above
 - b. Check for and Validate any prior training recorded on IMP website
 - i. Associate employee with organization on IMP:
 - 1) **Supervisor/Trainer/IMP manager** Log onto IMP website (www.improvingMIPractices.org) and click on <**Manage Employees Accounts**> on left side of screen under ‘Employee Management’
 - 2) On the ‘Managing Employees for Company...’ screen:
 - a. Click on <**Add Employee**> button which takes you to the ‘Add Employee for Company...’ screen
 - b. If employee already has an IMP account:
 - i. Type employee’s name into ‘Search’ box located in middle of screen, and click on <**Search**>
 - ii. If you get a match, click on <**Send Request**> button to invite employee to ‘join’ your organization
 1. This sends an email to the employee inviting them to join Organization IMP account (skip to **Step 1(2)(b)(i)(3)** below)
 - c. (*recommended) If employee does not have an IMP account:

- i. Enter all pertinent data in the boxes under the 'Add New Employee' section in the lower half of the screen
 - ii. Click on <Add New Account> button
 1. This sends an email to the employee inviting them to join your 'Company' account
- 3) **Employee** log into their IMP account to accept request to 'associate' with organization
 - By associating with organization, the employee is approving IMP manager(s) to view employee's past training activities, to view/print transcripts, and to assign courses
- ii. Check for previous training recorded in IMP (*if employee already had an IMP account)
 - 1) **Supervisor/Trainer/IMP manager** click on <Employee Transcripts> on left side of screen under 'Employee Management'
 - 2) On the '*company name* – Employee Transcripts' screen:
 - a) Click anywhere on Employee name which takes you to the 'Official Transcript' screen
 - i. Here, you can get a quick view of License Information, Courses Completed on IMP, and any Self-Reported courses that they may have taken
 - ii. Click on <Transcript> on left side of screen under 'Transcripts'
 - iii. Review IMP Transcript(s) to identify courses completed, and which (if any) fulfill training requirements identified in **Step 1(1)** above.
 - iv. *Recommended: Ensure previous training received satisfies all requirements as identified on STGW Guidelines (see Appendix C for example Guideline) specific to those training requirements identified in **Step 1(1)** above
3. Skip to **Step 6** below if all of the following conditions are met:
 - a. previous training received meets training required as identified in **Step 1(1)** above,
 - b. competency test has been taken with passing score (IMP test or test from recognized/trusted source),
 - c. training is current (falls within timelines found in Appendix B),
 - d. most recent break in performing similar work is no more than 24 months and,
 - e. no additional training/competency testing is required

Step 2 – Check Availability of Vetted Training

PIHP/CMHSP/Provider Designee can either provide training via already 'vetted' curriculum, as found on ImprovingMIpractices (IMP) website, or utilize locally vetted training curriculum.

1. If 'vetted' training curriculum is not already available, either locally or on IMP website:
 - a. Identify existing, or develop new, curriculum that meets the requirements identified in STGW Guideline(s) (see example Guideline in Appendix C)
 - b. Compare training program/curriculum against STGW Guideline(s), utilizing STGW 'Vetting' Tool (see Appendix D) as found in the Advisory Group section in the

Statewide Training Guidelines Work-Group (STGW) Advisory Group section of IMP.
Note: *Vetting process currently being evaluated by STGW*

- i. Vetted training program/curriculum must contain indicators to prove that it has been vetted against applicable Guideline(s) so that others know it has been vetted.
- ii. Those “indicators” must be included on the training program/curriculum primary handouts and any certificates of completion.
- iii. Through declaration of completion of the vetting process, the vetting agency (PIHP/CMHSP/Provider Designee) is ensuring to other employers/agencies that the training meets the Guideline(s) competencies.
- c. Vetted training(s) may be listed on the IMP website to be shared with others if vetting agency chooses (after STGW verifies curriculum through an audit function).
- d. For all newly vetted training, submit completed STGW ‘Vetting’ Tool(s) to STGW for tracking/auditing purposes.

Step 3 – Provide/Attest to Training

1. If providing ‘local’ training:
 - a. Must utilize Vetted training program/curriculum (developed in [Step 2](#) above)
 - *Note:* Utilization of vetted training ensures “comparableness of curriculum content elements” for reciprocity purposes
 - b. Must follow all STGW Guideline criteria (see example of requirements identified on the ‘Structure evaluation’ page of Appendix D [last page of document])
2. If utilizing IMP curriculum to provide training:
 - a. **IMP manager** Log onto IMP website (www.improvingMlpractices.org) and click on <**Employee Enrollment**> on left side of screen under ‘Employee Management’
 - i. On the ‘company name – Employee Enrollment’ screen:
 - ii. Click anywhere on Employee name which takes you to the next screen
 - 1) Verify that the Employee Name in middle of screen is the employee you are working with
 - 2) Click on <**Add Course**> button on right side of screen
 - 3) Search for the course(s) that you wish to assign to employee
 - 4) Click on the course, which expands the title to describe the training module selected.
 - 5) Click on <**Enroll Course**>
 - a. This sends an email to the employee informing them that they have been enrolled in a course
 - b. Employee logs into IMP website and participates in the course
 - b. **Employee** Log onto IMP website (www.improvingMlpractices.org) and click on <**MY COURSES**> tab on upper middle of screen
 - i. On ‘Course Overview’ screen, find assigned course, then click on <**course name**> and proceed to participate in course.

Step 4 – Ensure Availability of Competency Test (*informational only)

If your organization already has a training program in place, that tests for competencies as identified on STGW Guidelines (see Appendix C for example Guideline) specific to your training requirements, skip to **Step 5**.

If your organization does not already have a training program, or decides to utilize training available on ImprovingMIpractices website, know that STGW has been actively developing a question bank for all Guidelines; their goal being to have at least 50 questions for each. IMP has a process in place that will select a set number of random questions based on the Guideline(s) utilized in developing the training curriculum, pulling an equal number of questions from each Guideline (if multiple Guidelines utilized), and then presenting those questions via ImprovingMIpractices website.

Step 5 – Test Competence

1. If training was provided locally (see **Step 3(1)**):

Option 1: Utilize current/already existing provider identified competency testing that has been vetted against guideline requirements; **or**,

Option 2: Utilize IMP competency testing based on Guideline(s) utilized for ‘vetting’ training curriculum:

- a. **IMP manager** Log onto IMP website (www.improvingMIpractices.org) and click on **<Employee Enrollment>** on left side of screen under ‘Employee Management’
 - i. On the ‘*company name* – Employee Enrollment’ screen:
 - ii. Click anywhere on Employee name which takes you to the next screen
 1. Verify that the Employee Name in middle of screen is the employee you are working with
 2. Click on **<Add Course>** button on right side of screen (competency tests will be identified in the list along with courses)
 3. Search for the Competency test that you wish to assign to employee (identified specifically as a competency test)
 4. Click on the test, which expands the title to describe the test selected.
 5. Click on **<Enroll Course>**
 - a. This sends an email to the employee informing them that they have been enrolled in competency test
 - b. Employee logs into IMP website and participates in the competency test.
 - b. **Employee** Log onto IMP website (www.improvingMIpractices.org) and click on **<MY COURSES>** on upper left of screen
 - i. On Course Overview screen, click on **<test name>** and proceed to participate in competency test.
 - ii. Skip to **Step 5(3)** below.
2. If IMP curriculum was utilized to provide training (see **Step 3(2)** above), employee is automatically registered to take the competency test.

3. Regardless of method of training (locally vetted, or IMP provided), if employee scores less than 80%, [Step 3](#) above will need to be repeated before retake of test can occur (no retest should be allowed without 'refresher' training being provided).
4. *Recommended: Verify ability to perform job function(s).

Step 6 – Document Training in IMP (*recommendation only)

1. If utilizing IMP to provide Training/Testing, IMP documents the training and generates a transcript automatically upon completion of IMP provided competency test with an **80%** or higher score;
2. Otherwise, if competency testing provided 'locally' (i.e., not using IMP), this [Step](#) can be performed to document the training on IMP.
 - a. **IMP Member** (manager or employee) Log onto IMP website (www.improvingMIpractices.org) and click on <[Self Report A Course](#)> on left side of screen under 'Transcript'
 - i. On the 'Self Reported Courses' screen:
 - ii. Click on <[New Self Reported Course](#)> button
 1. Complete the required information
 2. Email is sent to the Company the member has submitted the course to and they will review the information and approve or deny the course.
 3. Under 'Self Reported Courses' section of IMP site status will change to "Pending Approval"
 4. Email is sent to the Member notifying what decision is made
 5. Under Self-Reported Courses section of IMP site status will change to reflect (Approved or Denied)
 6. If Approved, Course will appear on Member transcript under 'Self-Reported Courses' section.

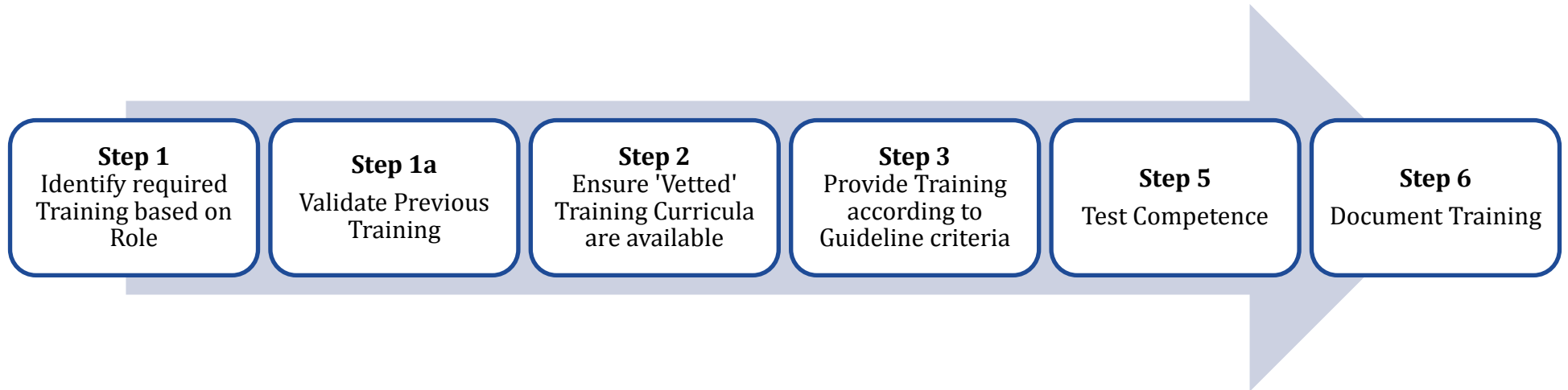
Appendix: Tools for Implementation

The following tools are provided for your use in preparing for training implementation.

- A. Training Implementation Overview
- B. STGW Direct Care Staff Training/Curriculum Grid
- C. STGW Guideline Example*
- D. STGW 'Vetting' Tool

Appendix A

A. Training Implementation Overview



Appendix B

B. STGW Direct Care Staff Training/Curriculum Grid

1. Balanced Budget Act 2. Health Insurance Portability and Accountability Act (HIPAA) 3. Deficit Reduction Act 4. Michigan Department of Health and Human Services (MDHHS) 5. Michigan Administrative Code 6. Michigan Mental Health Code 7. Michigan Occupational Safety and Health Administration (MIOSHA) 8. Code of Federal Regulations	SPECIALIZED RESIDENTIAL DSP, Home Managers	SPECIALIZED RESIDENTIAL Administrators	Community Living Supports (CLS) Non-24/7	Community Living Supports (CLS) 24/7	Skill Building Assistance (Pre-Voc / Non-Voc)	Supported/ Integrated Employment	Adult Foster Care Staff	Respite Service Staff	Self-Determination Staff	In-Home Service Staff (Children's Program)	Foster Family Group Home staff	Child-caring Institutions, Children's Group Home Staff	As Identified in the Person Centered Plan	Other Employee Group
	Training and Renewal Key: I = Initially I-AN = Initially & As Needed A = Initially and Annually 2 = Initially & every 2 years 3 = Initially & every 3 years IPOS = when identified in the IPOS													
	GUIDELINE TITLE	Source												
	Assisting People with Eating and/or Swallowing Difficulties													IPOS
	Autism Spectrum Disorder													IPOS
	Behavior and Crisis Intervention		3	3		3	3	3	3	3	3	3	3	IPOS
	Building Natural Supports		3	3		3	3	3	3	3	3	3	3	
	Cardio Pulmonary Resuscitation (CPR)	5	2*	2*	2*	2*	2*	2*	2*	2*	2*	2*	2*	
Crisis Planning			I-AN	I-AN		I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	
Critical Thinking and Creative Problem Solving			I-AN			I-AN	I-AN						I-AN	
Cultural Competence/Proficiency	4, 6, 8		3	3	3	3	3	3	3	3	3	3	3	
Documentation Skills			I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	
Due Process/Exercising Rights/Grievance and Appeals			A	A	A	A	A	A	A	A	A	A	A	
Emergency Preparedness			I-AN	I-AN		I-AN	I-AN	I-AN	I-AN			I-AN	I-AN	
First Aid	5		2*	2*	2*	2*	2*	2*	2*	2*	2*	2*	2*	
Food Safety			I-AN	I-AN		I-AN	I-AN	I-AN	I-AN		I-AN	I-AN	I-AN	
Health and Wellness	5, 6, 7		3	3		3	3	3	3	3		3	3	X**
HIPAA/Privacy/Confidentiality	2, 4, 5, 8		A	A	A	A	A	A	A	A	A	A	A	S*
Human Relationships			3	3	3		3	3	3	3		3	3	Z*
Immobility and Positioning													IPOS	
Infection Control & Standard Precautions			A	A	A	A	A	A	A	A	A	A	A	
Introduction to Human Services and Meeting Special Needs			I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	
Lifts & Transfers													IPOS	
Limited English Proficiency (LEP)	1, 4		3	3	3	3	3	3	3	3	3	3	3	
Medications	5		3	3	3	3	3	3	3	3	3	3	3	Z**
Nutrition			I-AN	I-AN		I-AN	I-AN	I-AN	I-AN	I-AN		I-AN	I-AN	Z***
Person Centered Planning / Individual Plan of Service	4, 6, 8		A	A	A	A	A	A	A	A	A	A	A	Y*
Philosophy and Current Trends in Providing Human Services			I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	I-AN	Z*, Y**
Recipient Rights	4, 5, 8		A	A	A	A	A	A	A	A	A	A	A	Y**
Suicide Risk Assessment and Intervention														IPOS
Teaching New Skills/Life Skills			3	3	3	3	3	3	3	3	3	3	3	
Train the Trainer														T*
Trauma Informed Services			3	3	3	3	3	3	3	3	3	3	3	S*

2* = As required by the National Certifying Organization
X** = Staff in any setting (voc centers, supported employment, workshop, etc where direct care services are provided)
Z* = Vocational staff; community employment coaches, providers, administrators, clinical staff, CMs and SUPCs
Z** = Staff in any setting where medications may be monitored or administered
Z*** = Anyone responsible for food intake as indicated by the IPOS
Y* = All Staff working with people receiving services
Y** = Anyone providing services
V* = mi Specialized Residential
V** = Case Mgrs / SUPC
T* = Requirement for qualified individuals interested in becoming trainers or option for current trainers
S* = Support Staff

Appendix C

C. STGW Guideline Example*

MACMHB State Training Guidelines Workgroup Training/Curriculum Recommendations

The intent of this Training Guideline is for the development and presentation of training content. Curricula based on this guideline will contribute to statewide training quality, uniformity, and reciprocity.

Topic: ***Introduction to Human Services and Meeting Special Needs***

Defining Paragraph (Vision, Boundaries, Overall Outcome Statement):

Individuals who receive supports and services through the public Mental Health system face 3 main challenges: Developmental Disabilities, Mental Illnesses, and Substance Use Disorders. Included are basic definitions, diagnoses, and causes. Issues pertaining to dual diagnoses and co-occurring disorders are introduced.

Definitions:

Content – These are a listing of the areas covered in the subject.

Outcomes/Competencies – These are statements about what participants will be able to do as a result of having participated in the course.

Outline – A suggested approach to meeting Outcomes/Competencies.

These three are interrelated, but not necessarily a one-to-one relationship.

Content:

1. Developmental Disabilities, Mental Illnesses, and Substance Use Disorders.
2. Characteristics of individuals who have been diagnosed with a Developmental Disability such as Autism, Cerebral Palsy, Epilepsy, Intellectual Disability, etc.
3. Characteristics of individuals who have been diagnosed with a Mental Illness such as Depression, Bi-Polar Disorder, Schizophrenia, Obsessive Compulsive Disorder (OCD), Post-Traumatic Stress Disorder, etc.
4. Characteristics of individuals who have been diagnosed with a Substance Use Disorder such as Alcohol or Prescription Drug misuse, Illegal Substance use, etc.
5. Characteristics of individuals who have been diagnosed with co-occurring disorders such as a Mental Illness as well as Substance Use Disorder, Developmental Disability as well as Mental Illness, or Developmental Disability as well as Substance Use Disorder.

Outcomes/Competencies:

1. Identify types of Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders
2. Recognize prevalence and effects of Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders.
3. Identify the challenges people with Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders may face

Outline:

1. Introduction to diagnosis system and the current Diagnostic and Statistical Manual (DSM). What are Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders?
2. Introduction to Developmental Disabilities. This may include diagnoses such as Autism, Cerebral Palsy, Epilepsy, Intellectual Disability, etc. Included can be definitions, common characteristics, national/local statistics, and personal experiences.
3. Introduction to Mental Illnesses. This may include diagnoses such as Depression, Bi-Polar Disorder, Schizophrenia, Obsessive Compulsive Disorder (OCD), Post-Traumatic Stress Disorder, etc. Included can be definitions, common characteristics, national/local statistics, and personal experiences.
4. Introduction to Substance Use Disorders. This may include diagnoses such as Alcohol or Prescription Drug misuse, Illegal Substance use, etc. Included can be definitions, common characteristics, national/local statistics, and personal experiences.
5. Introduction to Co-Occurring disorders. This may include diagnoses such as a Mental Illness as well as Substance Use Disorder, Developmental Disability as well as Mental Illness, or Developmental Disability as well as Substance Use Disorder. Included can be definitions, common characteristics, national/local statistics, and personal experiences.

Trainer Qualifications:

Check all that apply, be specific (years, degree, skills, etc):

- ☒ College Degree: Prefer degree in some area of human services
- ☐ License:
- ☒ Years Experience (please specify below): At least one year experience working in Direct Service and/or Case Management
- ☐ Documented Skill Set:
- ☐ Training Experience:
- ☒ Trainer in Adult Learning Styles/Methods:

Introduction to Human Services

2

- ☒ Other: Certified Peer Support Specialists, Peer Mentors, and/or Persons with lived experience may provide valuable contributions along with the primary instructor

Specified experience:
none

Length of Training:

The length of training should be adequate to achieve the outcomes/competencies listed above, approximately 3-4 Hours (dependent on class size).

Format:

The acceptable format(s) for the class:

- ☒ Blended Learning (Online + Instructor-Led)
☒ Instructor-Led Class
☐ Instructor-Led Webinar
☐ Online Course
☐ Other (specify):

Teaching Methods:

These are the best methods for teaching course content. Additional methodologies may also enhance learning.

- ☒ Individual
☒ Classroom/Group
☒ Lecture
☒ Discussion
☐ Skills Practice
☐ Return demonstrations
☒ Activities
☒ Videos
☒ Online Activities
☐ Individual Assignments
☐ Homework assignments
☐ Case Study
☐ Other (specify):

Method of Assessment:

How to measure entry level competency in this course:

- | | |
|--------------------------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> Written Test | Performance Indicator: 80 % |
| <input type="checkbox"/> Return Demonstration | Performance Indicator: P/F |
| <input checked="" type="checkbox"/> Online Test | Performance Indicator: 80% |
| <input type="checkbox"/> Skill Sheet | Performance Indicator: 80% |
| <input type="checkbox"/> Other: | |

Scope of Implementation:

Training recommended for:

- ☒ Specialized Residential direct care staff/home managers
- ☒ Specialized Residential Administrators
- ☒ Community Living Supports (CLS) 24/7 care required
- ☒ Community Living Supports (CLS) Non-24/7 care required
- ☒ Skill-Building Assistance (Pre-Voc Skill Building / Non-Voc Skill Building)
- ☒ Supported/Integrated Employment Service (ie. Clubhouse, Competitive Employment, volunteer)
- ☒ Adult Foster Care staff
- ☒ Respite Service staff
- ☒ Self-Determination staff
- ☒ In-Home service staff (children's program)
- ☒ Foster Family Group Home staff
- ☒ Child-caring Institutions (Children's Group Home) staff
- ☒ As identified in the Individual's Person Centered Plan
- ☐ Other employee group (specify):

Frequency:

It is recommended the content be reviewed/retaken.

- ☐ Initial & Annual
- ☒ Initial & As Needed
- ☐ Initial & Every two (2) years
- ☐ Initial & Every three (3) years
- ☐ As directed by the Individual Plan of Service
- ☐ Other:

Additional Comments:

This course could serve as an update for staff as new information becomes available and/or as needs arise. May also be used as a remedial action for staff.

References/Legal Authority:

- 1) MDHHS – Department of Licensing and Regulatory Affairs
- 2) MDHHS Contract
- 3) Administrative Rules for Specialized Services
- 4) DSM V
- 5) MCL400.710(3)
- 6) R330.1801 et. seq.

- 7) Prevailing State Guidelines and Practice Protocols
- 8) Substance Abuse and Mental Health Services Administration - www.samhsa.gov/
- 9) National Institute of Mental Health - www.nimh.nih.gov/
- 10) Dept. of Health and Human Services/Centers for Disease Control and Prevention/Developmental Disabilities - www.cdc.gov/ncbddd/dd/

Note: If training is for an adult foster care facility/home adult foster care staff must also comply with the adult foster care administrative rules. In addition, in those situations where the contents of the training conflict with an administrative rule, the rule prevails.

Appendix D

D. STGW 'Vetting' Tool example*

Content evaluation

Guideline: Introduction to Human Services

Content	Met? Y / N Y = 1 N = 0	<i>If No:</i> What is missing? What is the plan to correct or update? <i>If Yes:</i> Is this a stand-alone course? If embedded into another training, please detail.
1. Developmental Disabilities, Mental Illnesses, and Substance Use Disorders.		
2. Characteristics of individuals who have been diagnosed with a Developmental Disability such as Autism, Cerebral Palsy, Epilepsy, Intellectual Disability, etc.		
3. Characteristics of individuals who have been diagnosed with a Mental Illness such as Depression, Bi-Polar Disorder, Schizophrenia, Obsessive Compulsive Disorder (OCD), Post-Traumatic Stress Disorder, etc.		
4. Characteristics of individuals who have been diagnosed with a Substance Use Disorder such as alcohol or Prescription Drug misuse, Illegal Substance use, etc.		
5. Characteristics of individuals who have been diagnosed with co-occurring disorders such as a Mental Illness as well as Substance Use Disorder, Developmental Disability as well as Mental Illness, or Developmental Disability as well as Substance Use Disorder.		

0

Score: 5 possible

Outcome evaluation

Guideline: Introduction to Human Services				
Recommended Outcomes/Competencies as listed on the state training guide	Outcomes Met Here: Class Name(s)	Outcomes Met How?	Met? Y / N Y = 1 N = 0	Comments
	Example: Introduction to Human Services and Meeting Special Needs: Stand alone or embedded in another course	Example: group activity, reading material, handout, video, lecture, etc.		
1. Identify types of Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders				
2. Recognize prevalence and effects of Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders.				
3. Identify the challenges people with Developmental Disabilities, Mental Illnesses, Substance Use Disorders, and Co-Occurring Disorders may face				
Score: 3 possible			0	

Structure evaluation

Guideline: Introduction to Human Services

Trainer Qualifications							
	College Degree	License	Years Experience	Documented Skill Set	Training Experience	Trainer in Adult Learning	Other
	Prefer degree in some area of human services		At least one year experience working in Direct Service and/or Case Management			X	Certified Peer Support Specialists, Peer Mentors, and/or Persons with lived experience may provide valuable contributions along with the primary instructor
Guideline Recommendations							
My Organization's Trainer 1							
My Organization's Trainer 2							

Length		
	Live Hours	Online Hours
Guideline Recommendations	3-4	1.5-2
My Organization		

Format					
	Blended Learning (Online + Instructor-Led)	Instructor-Led Class	Instructor-Led Webinar	Online Course	Other
Guideline Recommendations	X	X			
My Organization					

Teaching Methods

	Individual	Classroom /Group	Lecture	Discussion	Skills Practice	Return Demonstrations	Activities	Videos	Online Activites	Individual Assignments	Homework Assignments	Case Study	Other
Recommended	X	X	X	X			X	X	X				
My Organization													

Method of Assessment

	Written Test Performance Indicator: 80%	Return Demonstration Performance Indicator: P/F	Online Test Performance Indicator: 80%	Skill Sheet Performance Indicator: 80%	Other
Guideline Recommendations	X		X		
Trainer 1					
Trainer 2					

Scope of Implementation

	Specialized Residential direct care staff/home managers	Specialized Residential Administrators	Community Living Supports (CLS) 24/7 Care Required	Community Living Supports (CLS) Non-24/7 Care	Skill Building Assistance (Pre-Voc Skill Building / Non-Voc Skill Building)	Supported/Integrated Employment (Clubhouse, Competitive Employment)	Adult Foster Care	Respite Service staff	Self-Determination staff	In-Home servicew staff (children's program)	Foster Family Group Home staff	Child-caring Institutions staff (Children's Group Home)	As Identified in IPOS	Other
Guideline Recommendations	X	X	X	X	X	X	X	X	X	X	X	X	X	
My Organization														

Frequency

	Initial & Annual	Initial & As Needed	Initial & Every 2 yrs (two)	Initial & Every 3 yrs (three)	As directed by the IPOS	Other
Guideline Recommendations		X				
My Organization						