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Requirements

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Applicability: DDSN Regional Center and Community Staff who work directly with individuals who receive services; Volunteers who

the place of staff; Non-direct support staff as deemed appropriate by the Facility Administrator/Executive

Director

#### **Purpose**

work in

The quality of the services provided by the South Carolina Department of Disabilities and Special Needs (DDSN) and its Contracted Providers is dependent upon well-trained staff. It is the intent of this directive to establish the required minimum level of staff competency so that those who support individuals with disabilities acquire the knowledge, skills and sensitivity to meet the needs of those individuals, consistent with the mission and vision of DDSN.

DDSN's person centered approach to service planning requires that those who implement it have a clear perception and commitment to the values of rights and personal freedoms, choice, self-determination, dignity, respect, safety, health, relationships and community connections. These values are expected to be imbedded throughout the context of the training. Staff must be sensitive to the fact that the quality of services provided directly impacts the quality of life of the individuals served.

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### **Policy**

New employees, full and part-time, temporary or contractual employees for whom training is deemed appropriate will be trained to a minimum level of competency. The attached curriculum outline will serve as the minimum requirement; however, providers are encouraged to embellish it or design their own so long as it contains the minimum requirements.

**NOTE**: Primary caregiver/family employers assume all responsibility for training their caregiver. If Waiver funded, they must be trained in designated topics on the attached curriculum.

Staff whose job descriptions indicate the duty of working directly with individuals who receive services shall be trained according to the minimum requirements set forth herein. Facility Administrators/Executive Directors/CEOs have the authority to decide which of their staff and/or consultants in other non-direct support positions should be trained in accordance with the recommendations set forth in this Directive. Volunteers who work in the place of direct care staff shall be trained according to this directive. Caregivers who provide services funded by the MR/ID, HASCI and Community Support Waivers must be deemed competent in designated areas and meet other minimum qualifications as specified in the applicable waiver manuals. Training requirements specific to Early Interventionists are outlined in the Early Intervention Manual. Training requirements specific to Case Managers are outlined in the Case Management Manual.

Competency will be demonstrated by a combination of written tests and skills checks. To recognize the value of prior training and eliminate duplication, a "test out" option may be offered in which the person demonstrates the required competency before training by passing the written test and/or skills check. In order to qualify for the "test out" option, staff must have had the equivalent of two (2) year's full-time experience working with individuals with disabilities. Staff who have previously demonstrated competency in another job within 12 months prior to their hire date, must receive credit for the training upon presentation of documentation of successful completion. Staff who have been working in a position that is not in direct contact with individuals served and who later transfer into a direct support position, must complete the pre-service modules of the recommended curriculum prior to working directly with individuals served.

All staff are required to receive an additional ten (10) hours of job-related training annually. These hours are in addition to the required annual recertification noted on the attached curriculum. Professional staff meetings, workshops and conferences related to job functions may be considered in meeting this requirement. Caregivers employed by families/primary caregivers are exempt from this requirement, no matter the funding source.

### **Best Practices**

The pre-service curriculum must teach the skills needed to insure the safety of both staff and individuals who receive services upon entry into the work environment (i.e., how to deal with life-threatening events). For example, Fire Safety/Disaster Preparedness should be taught in pre-

service while assisting with choices and decision-making should be learned after staff have had some experience with individuals who receive services.

### **Trainer Competencies**

A successful training program will have trainers who are competent in the following areas:

- Knowledge of material presented
- Understanding of adult learning styles
- Understanding of theories and techniques of training
- Presentation skills
- Group process skills including: questioning, feedback, negotiating

# Supervisor's Role in Training

Adults learn best when they can apply new information to an existing frame of reference. They also need to understand the immediate application of new information. Experiential learning is preferred to presentations of material. The best practice models place more emphasis on on-the-job training (OJT). Supervisors can reinforce concepts covered in the classroom by using checklists designed to insure the transfer of new skills and information from the classroom to the worksite. Supervisors might also identify a coach or mentor who can work with new staff.

## **Self Advocates Role in Training**

The involvement of individuals who receive services in training is very effective in helping new staff develop a clearer understanding of their roles. For example, having an individual who receives services talk with new staff about the importance of respect and dignity drives the point home much more effectively than written material or overheads. An individual who receives services sharing information to new employees about abuse and how to prevent it can have a powerful impact that staff carry throughout their careers.

#### Job Aids

Materials such as checklists, posters, notebooks, fact sheets, resource lists, etc., developed and implemented by the trainer can assist staff in the transfer of learning from the classroom to the work site. They can also help with decision-making; provide information and support policies and procedures. Use of such materials can reduce training time and the need for staff to rely on memory.

#### **Evaluation**

Some form of post-training evaluation should indicate whether staff have met the required level of competency. This can include testing, skills checks, interviews, observations, etc. The post-training evaluation may also be used for the "test out" option.

## **Continuing Training**

Staff must periodically be required to demonstrate continuing competency on the most critical information and skills taught in the curriculum. Providers have wide latitude in designing the format of such rechecks; however, the provider must take prudent and reasonable steps to ensure that the rechecks are actually completed by the staff who receives the credit.

Encouraging staff commitment to continuing personal and professional development will expand the capacity to provide quality service and supports. Staff should routinely be exposed to information regarding training resources and opportunities. Supervisors should be working with staff to identify annual personal and professional goals.

#### **Documentation**

A record of all staff training must be kept on file.

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(Originator)

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State Director (Approved)

To access the following attachments, please see the agency website page "Attachments to Directives" under this directive number.

Attachment: Outline of Minimum Requirements for Curriculum