

Consumer/Authorized Representative
Employee Core Competencies Verification

Consumer Name	Employee Name
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Before providing the first episode of service to the consumer, the provider shall successfully complete training in the following five areas of core competency.

My signature below serves as verification that the above named individual has been properly trained to meet my service needs as listed on my service plan.

This training has included:

Review of OAC 173-39-02.4 Choices Home Care Attendant Service.

Review of OAC 173-39-02 (D) Conditions of Participation for consumer –directed Individual providers.

Review of OAC 173-39-02 (G) Failure to follow Conditions of Participation

Activities of Daily Living (ADLs) includes but is not limited to: bathing/showering, dressing/undressing, hair care, nail care, shaving, oral hygiene, skin care, toileting, transferring positions, repositioning, assisting with eating, restorative therapy assistance, use of (including training for) adaptive equipment and is dependent on the specific needs of the individual enrolled on the PASSPORT Program.

Training Completion Details:

(Circle Applicable Format):

In Person Online

Date Completed:

Comments:

Instrumental Activities of Daily Living (IADLs)/Maintaining a Clean and Safe Environment includes but is not limited to: meal preparation and clean up, laundry, changing bedding, basic housekeeping, maintaining clear pathways, waste disposal, transporting consumer, providing a safe exit, coordinating appointments, assisting with correspondence, assisting with paying bills and is dependent on the specific needs of the individual enrolled on the PASSPORT Program.

Training Completion Details:		
(Circle Applicable Format):	In Person Online	Date Completed:
Comments:		

Communication and Administration includes but is not limited to: working with the consumer/AR and case manager to implement the service plan, proper documentation of timesheet and task details sheet, maintenance of documents for program reviews and is dependent on the specific needs of the individual enrolled on the PASSPORT Program.

Training Completion Details:		
(Circle Applicable Format):	In Person Online	Date Completed:
Comments:		

Basic Home Safety includes but is not limited to: ways to avoid falls, fire safety and responding to emergency situation, preparing an emergency preparedness kit; requires a certificate of completion to be obtained by the Employee and a copy provided to ODA.

Training Completion Details:

(Circle Applicable Format): In Person Online Date Completed:

Comments:

Universal Precautions of Infection Control includes but is not limited to: proper hand washing, proper disposal of bodily waste; requires a certificate of completion to be obtained by the Employee and a copy provided to ODA.

Training Completion Details:

(Circle Applicable Format): In Person Online Date Completed:

Comments:

Consumer/authorized representative signature

Date

Employee signature

Date