



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

PROCEDURE	
Subject: Department on Disability Services: Training	
Responsible Program or Office: Developmental Disabilities Administration	Number: 2019-DDA-PROC-01
Date of Approval by the Director: March 8, 2019	Number of Pages: 8
Effective Date: March 8, 2019	Expiration Date, if any: N/A
Supersedes Provider Training Procedure, 2016-DDA-TRAINING-PR001 (July 6, 2016)	
Cross References, Related Policies and Procedures, and Related Documents: Provider Staff Training Policy; Incident Management and Enforcement Unit Policy and Procedures; Human Rights Policy; Behavior Support Policy and Procedures; Regulations Implementing the Home and Community-Based Services Waiver for Individuals with Intellectual and Developmental Disabilities (29 DCMR § 1900 <i>et seq.</i>); and Person-Centered Thinking Tools Procedure	

1. PURPOSE

This purpose of this procedure is to establish the standards, guidelines and training requirements for all provider staff that deliver supports and services to people receiving services as part of the Developmental Disabilities Administration (DDA) service delivery system.

2. APPLICABILITY

This policy applies to all DDA providers, vendors, and consultants that provide services and supports on behalf of people with intellectual and developmental disabilities receiving services as part of the DDA service delivery system funded by the Department on Disability Services (DDS) or the Department of Health Care Finance (DHCF).

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3. PROCEDURES

The following are the standards by which the DDA will evaluate compliance with the training policy:

A. Phase I – Overview/Employee Orientation

1. Phase I training may be offered live by an approved provider trainer, as described below; may be taken through the University of the District of Columbia; or may be taken through a DDS-approved on-line course.
2. Live Phase I training may only be offered by an approved trainer who uses the DDS curriculum and meets the following criteria:
 - a. The provider shall designate one or more mid-level manager staff position(s) to be responsible for coordinating staff training. The employee responsible for staff training should have broad knowledge of support and service needs of people with intellectual disabilities and possess the necessary skills to organize and implement a training program. The provider shall ensure that the approved trainer(s) is (are) competent to provide each employee with initial and continuous training which enables the employee to perform his or her duties effectively, efficiently, and competently.
 - b. The approved trainer must have a minimum of three years of experience in the field of developmental disabilities providing direct supports; or specific practical expertise/certification in the subject matter (for example, the providers' incident management coordinator teaching the Incident Management course) in order to verify competency to train staff.
 - c. The approved trainer must have completed DDA Person-Centered Thinking (PCT) training or PCT training that is otherwise consistent with the Learning Community Curriculum (<http://www.learningcommunity.us/>).
3. A person who has successfully passed the University of the District of Columbia Direct Support Professional/workforce course is credited as having successfully completed Phase I training.
4. Web-based Phase I training must meet the minimum requirements of the DDS online Phase I curriculum provided on the DDS Training Institute webpage at <https://dds.dc.gov/node/807122>.





5. Phase I Training Requirements: The following nine modules are required:
 - a. Introduction to Developmental Disabilities;
 - b. Health and Wellness;
 - c. Adaptive Equipment;
 - d. Introduction to Human Rights;
 - e. Universal Precautions and General Safety Guidelines;
 - f. Incident Management;
 - g. A Blueprint for Service;
 - h. Making Friends and Building Relationships; and
 - i. Quality of Life.
6. Each provider shall establish a written training plan and/or policies and procedures to maintain compliance with this standard.
7. All new hires in direct support roles, not limited to Direct Support Professionals (DSPs), must complete Phase I training prior to working independently with people who receive supports and services from DDA.
8. Phase I training is intended to be portable. A person who has already taken Phase I training is not required to repeat it when he or she takes a new job unless there is a break in service in the field of six months or greater. However, when that person changes or takes a new job, he or she must complete A Blueprint for Service at time of hire, if that module was not previously taken. When the break in service is six months or more but less than two years, the person must retake a refresher module in Incident Management and Introduction to Human Rights and pass the tests at the 80% proficiency level. After a break of two years or greater, the person must retake all nine modules of Phase I training.
9. In order to show evidence of completion of Phase I training, providers must have paper or electronic records, which include the title/ subject of each training module, signature of the supervisor or approved trainer, and signature of each staff person who completed the training, or a certificate or transcript. Electronic class completion confirmations are acceptable, including electronic signatures or unique user log-in records.
10. For the Incident Management and Quality of Life modules, records must include competency verification based on an 80% passing score and, on the measure designated by the trainer.





B. Phase II – On-going/Person-Centered Training

1. Approved Trainer(s): Qualified Trainers for Phase II include clinicians, Qualified Intellectual Disabilities Professional (QIDPs), Registered Nurses or family members with experience in care of the person. Each approved trainer must have knowledge of and expertise in the specific needs of the person. Phase II must be offered with a live trainer, but includes the use of technology.
2. Phase II Training Requirements: Phase II training shall include training on the specific needs of the person and may include, but is not be limited to, one or more of the following if necessary to support the person:
 - a. Health Care Management Plan (HCMP);
 - b. Health Passport;
 - c. Individual Support Plan (ISP);
 - d. Behavior Support Plan (BSP);
 - e. Individual Program Plan (IPP);
 - f. Teaching strategies;
 - g. Personal Emergency Preparedness Plan (PEP);
 - h. Nutrition;
 - i. Specialized dining techniques;
 - j. Transfer and mobility procedures;
 - k. Seizure disorders/protocols;
 - l. Adaptive equipment; and
 - m. Medications/side effects, etc.
3. All staff in direct support roles, not limited to DSPs, must complete Phase II training prior to working alone with a person (if a new hire or supporting a new person) and on-going as changes occur in the person's support needs as identified in the person's ISP or BSP; and again before the staff works with any new person. Family members who are experienced in the care of a specific person are exempt from taking Phase II training for the care of that person.
4. Evidence of Phase II training must include records showing the date the training occurred, initials of the person upon whom the specialized in-service training focuses; signature of the supervisor or experienced staff member facilitating the training session; and the signature of the staff member attending. If group training is conducted, it must be clear that the training content is individualized to the unique needs of the people the staff person in attendance is supporting.



5. In the event of an emergency in which a staff member is filling in to support a person for whom they have not already completed Phase II training, and it is not possible to shadow an existing staff member who works with the person, the provider may brief the staff on the person's unique support needs. However, Phase II training must take place before the staff member works with the person again or is assigned to work with the person regularly.
6. Proof of proficiency in Phase II training shall be evidenced by provider records showing that a staff person received on-the-job training on a person's individualized support needs. At minimum, those records shall include a training attendance sheet signed by the person and by the trainer with written affirmation from the trainer(s) that the person has achieved the necessary level of competence.

C. Phase III – Annual Trainings/Certification Renewals

1. Approved Trainer(s): Phase III training shall be conducted by a trainer with a minimum of three years of experience in the field of developmental disabilities; by professionals with specific practical expertise/certification in the subject matter (for example, the provider's adaptive equipment coordinator teaching the DDS Adaptive Equipment Maintenance Protocol course) or nationally accredited institutions with expertise in providing certification on the subject area; or through approved on-line courses. A provider must request and receive approval of on-line courses from the DDS Human Capital Administrator, or his or her designee, prior to administering this training to staff.
2. Phase III Training Requirements: Required annual trainings or certifications prior to working with the person include certifications or trainings in the following areas:
 - a. CPR via in-person class;
 - b. First Aid;
 - c. Universal precautions and infection control which meets the Occupational Safety and Health Administration (OSHA) requirements; as well as additional OSHA training for people who may be exposed to hazardous chemicals (For the first year, coverage in Phase I is sufficient; this must be repeated annually.);
 - d. Behavioral Intervention Procedures (*e.g.* Mandt, CPI, or Positive Behavior Strategies), where applicable;
 - e. Emergency Preparedness, including fire and safety precautions (This includes a review of PEPPs and CEPPs as well as training on basic fire safety, such as where to locate and how to use a fire extinguisher, and when you would use one versus evacuating.);



- f. Health Insurance Portability and Accountability Act (HIPAA) training and guidelines to maintain confidentiality;
 - g. Medication Administration (TME Certification), where applicable;
 - h. DDS Adaptive Equipment Maintenance Protocol, available on-line at: <https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Adaptive%20Equipment%20Maintenance%20Protocols.pdf>; and
 - i. Recognition of, prevention of, and obligation to report abuse, neglect, exploitation and serious physical injury (per the DDS-approved Incident Management and Enforcement Unit policy and related procedures) (For the first year, coverage in Phase I is sufficient; this must be repeated annually.).
3. A person who completed one module of Phase 1 training within the most recent twelve months is not required to repeat that module of training in Phase III; a staff member does not have to pass the training twice in twelve months.
 4. Phase III training must be completed before staff works independently with a person and then is required annually. Providers may use either date of hire or calendar year to establish an annual schedule for staff to maintain active certifications, but may not switch back and forth resulting in training gaps of staff during any twelve-month period. Likewise, for topics which do not require certifications, trainings must be taken at least every twelve months, with no gaps. Each staff member must receive Phase III Annual Trainings/Certification Renewals training within any and each twelve-month period where they provide direct services and/or supports to people with intellectual and developmental disabilities.
 5. Evidence/records of Phase III training must include the name of the trainee, the date of hire, the name of the trainer, the name of the organization sponsoring the training, the title of the training, the date of the training, and the duration of the training in hours.

D. Phase IV – Professional Development/Continuing Education

1. Approved Trainer(s): Phase IV training shall be conducted by a trainer with a minimum of three years of experience in the field of developmental disabilities; by professionals with specific practical expertise/certification in the subject matter or nationally accredited institutions with expertise in providing certification on the subject area; or through approved on-line courses. A provider must request and receive approval of on-line courses from the DDS Human Capital Administrator, or his or her designee, prior to administering this training to staff.



2. Phase IV training requirements: Phase IV training is ten hours of professional development and/or continuing education training, which is required of all staff with direct support roles and shall be maintained on an annual basis, or at the person's anniversary date of hire.
 - a. All people currently working in a direct support role must complete ten hours of Phase IV training each year.
 - b. Providers may use either date of hire or calendar year to establish an annual Phase IV training schedule, but may not switch back and forth resulting in training gaps of staff during any twelve-month period.
 - c. All staff must receive Phase IV Professional Development/Continuing Education training within any and each twelve-month period where that staff member provides direct services and/or supports to people with intellectual and developmental disabilities.
 - d. A provider may not substitute any other phase (*i.e.* Phases I through III) training to satisfy Phase IV training requirements.
3. Evidence/records of Phase IV training must include the name of the trainee, the name of the trainer, the name of the organization sponsoring the training, the title of the training, the date of the training, and the duration of the training in hours.

E. Other Training Requirements

1. Provider Owner-Operator, Executive Staff & Program Managers

Owners-operators, executive staff and program managers of provider agencies in the Home and Community-Based Services Waiver for Persons with Intellectual and Developmental Disabilities (HCBS IDD) program (specifically, providers of Day Habilitation, Employment Readiness, Individualized Day Supports, Supported Living, Supported Employment, Supported Living with Transportation, Host Home, Residential Habilitation and In-Home Supports Services) or Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs) are required to take training in:

- a. Person-Centered Thinking: This is a two-day live course which uses a training curriculum approved by DDS or the International Learning Community for Person-Centered Practices.





- b. Supporting Community Integration (Discovery): The TASH/ANCOR training on Discovery is one example of an acceptable webinar-based training.
 - c. Supported Decision Making: DDS recommends web-based training offered through the National Resource Center for Supported Decision-Making.
 - d. Any other topics determined by DDS and published to the provider community through regulation, policy, procedure, or transmittal.
 - e. Existing providers must already have completed this training in accordance with HCBS IDD waiver requirements. New providers must complete the training prior to being approved to initiate services.
 - f. Evidence and records of management/executive staff training shall include date of hire, records of attendance, name of the person attending, date and time of the training, title/subject of the training, and confirmation of successful completion of trainings, including proficiency levels of 80% on required proficiency tests.
2. Staff of Individualized Day Supports
- a. Individualized Day Supports (IDS) provider staff are required to complete mandatory orientation offered by the provider and consistent with the “Train the Trainer” course designed by the IDS Providers Community of Practice. The course must include the Community Mapping and the Supporting People to Use Public Transportation trainings and may include other trainings specific to IDS.
 - b. Evidence and records of training shall include: name of person, date of hire, records of attendance, date and time of training, title/subject of training, and confirmation of successful completion of training, with results of a provider developed proficiency test conducted at the conclusion of each training session, with a proficiency level of 80% required.