

**TRAINING CHECKLIST FOR DIRECT CARE STAFF
(NOT LICENSED OR CERTIFIED MEDICAL PROFESSIONALS)**

NAME:		20 __			20 __			20 __		
DATE OF HIRE:		AT HIRE			CE TRAINING			CE TRAINING		
GENERAL CORE CURRICULUM TRAINING 40 TRAINING HOURS WITHIN FIRST 4 WEEKS OF EMPLOYMENT <i>* PER LICENSEE DISCRETION</i>		REQUIRED	DATE	TRAINER	REQUIRED	DATE	TRAINER	REQUIRED	DATE	TRAINER
INITIAL 20 HOURS	CULTURAL COMPETENCY *	1								
	RESIDENT RIGHTS *	2								
	POSTURAL SUPPORTS & SPECIAL CARE	4 HOURS TOTAL			4 HOURS TOTAL			4 HOURS TOTAL		
	POSTURAL SUPPORTS	1								
	RESTRICTED HEALTH CONDITIONS	2								
	HOSPICE CARE	1								
	PERSONAL CARE SERVICES *	3 HOURS TOTAL								
	FALL PREVENTION	1								
	INFECTION CONTROL, PROPER HANDWASHING, COUGH	1								
	ADVANCE DIRECTIVES, HIPAA & DNR	1								
MEDICATION TRAINING	4 HOURS TOTAL									
POLICIES AND PROCEDURES REGARDING MEDICATION	2									
ANTIPSYCHOTIC AND PSYCHOTROPIC MEDICATIONS	2									
DEMENTIA CARE	12 HOURS TOTAL			8 HOURS TOTAL			8 HOURS TOTAL			
DEMENTIA CARE (PART 1)	6			4			4			
DEMENTIA CARE (PART 2)	6			4			4			
REMAINING 20 HOURS	BUILDING AND FIRE SAFETY AND RESPONSE TO EMERGENCIES *	8 HOURS TOTAL			TRAINER'S NAME / INITIALS _____ / _____ _____ / _____ _____ / _____ _____ / _____					
	BASIC HOME AND SAFETY	4								
	EMERGENCY AND DISASTER PREPAREDNESS POLICY AND PLAN	4								
	PHYSICAL LIMITATIONS AND NEEDS OF THE ELDERLY	2 HOURS TOTAL								
	PRESSURE ULCER PREVENTION AND EARLY TREATMENT	1								
	AMBULATION ASSISTANCE AND TRANSPORT TECHNIQUES	1								
	PSYCHOSOCIAL NEEDS OF THE ELDERLY *	4 HOURS TOTAL								
PAIN MANAGEMENT	2									
PALLIATIVE CARE	2									
FIRST WEEK OUT	HANDS ON TRAINING	16 HOURS TOTAL								
	DAY ONE: ORIENTATION	4								
	DAY TWO	4								
	DAY THREE	4								
	DAY FOUR	4								
	MEDICATION HANDS ON TRAINING	6 HOURS TOTAL								
	DAY ONE: INTRODUCTION	2								
DAY TWO	2									
DAY THREE	2									