



## Expert DSP Training Checklist

EMPLOYEE NAME: \_\_\_\_\_

EMPLOYEE NO.: \_\_\_\_\_

LOCATION: \_\_\_\_\_

DATE: \_\_\_\_\_

### **DIRECTIONS:**

**Employee:** Fill in your name, employee number, location, date, and put your initials on the Employee line at the end of each section as the material for that section is completed. After all material is covered, read the last paragraph and sign the last line.

**Trainers:** Sign at the end of each section, when completed. Fill in the date and length of time it took for the material to be covered on the line at the end of each section.

### **I. Director of Finance x203**

#### **Financial**

##### **A. Organizational Structure**

##### **B. Individual Resident Ledgers (non-collective account)**

1. Ledgers- checking, savings, food stamps, laundry (electronic for SL)
2. Paychecks & paycheck stubs (direct deposit or non-direct deposit)
3. Banking
4. Money counts
5. Pulling money
6. Paying bills, budgeting, auto-pay & notification to be paid
7. RS Financial checks during the month (SL)
8. Reporting income changes to Social Service Coordinator
9. Ensure receipt and witness obtained
10. Need Receipts/Vouchers
11. End of Month Turnover – deadlines/flow to appropriate departments
  - A. What is turned in by SPC
  - B. What is turned in by RS to PC
  - C. Monthly financial update form
12. Balancing of accounts by finance department and follow-up
13. Payeeship – purpose, applying, responsibility

##### **C. Resident Funds via Accounting System**

1. Petty “Cash”
  - A. Daily petty cash form (electronic for SL)
  - B. Receipt of money received (staff)
  - C. Daily money counts
  - D. Need receipts
  - E. Weekly petty cash summary (ICF)
  - F. Weekly petty cash / Request for reimbursement of funds (ICF)
  - G. Weekly turn in (ICF)
2. Credit Card
  - A. Need receipts
  - B. Initializing and coding receipts
  - C. Receipts of money received
  - D. Weekly turn in
3. Additional information regarding Individual Resident Ledgers, petty cash and credit cards
  - A. Use of tax exempt forms
  - B. Use of Giant Eagle Advantage card
  - C. Pay check stubs to SSC
  - D. Patient liability
  - E. Review of individual monthly statements
    1. Verification of money spent
  - F. Paying bills
4. ATM – purpose/responsibilities (SL)

- A. RS uses ATM cards for cash
- B. ATM Ledger
- D. **Reports:**
  - 1. Dashboard
  - 2. Bi-weekly reports
  - 3. PTO Reports
  - 4. Monthly Financial Reports } Agency & Consumer monthly accounts
- E. **Additional Information, Accounts Payable and Payroll**
  - 1. Time approval
  - 2. SPA's
  - 3. Requests for Reimbursements
    - A. Reimbursement check from the office (ICF)
  - 4. Mileage Reimbursements
  - 5. Maintenance Concern Log
  - 6. Funding:
    - A. Supported Living } IO Waiver, Level 1 Waiver, SL Funding, Limits, Buy-In Program
    - B. ICF Funding
    - C. Mileage
    - D. Vocational } Day Services, PEACE
  - 7. Recommended Reading
    - A. Policy 202, 203, 303, 304, 506, 608 and 610 (HR Policy Manual)
    - B. Policy 601 and 607 (Administrative Policy Manual)

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Date	Time Spent	Employee	Director of Finance
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**II. Administrator on Call (330) 807-1645**

- A. **Role**
- B. **Coverage Meetings**
- C. **Call off coverage and responsibility**
- D. **Site updates**
- E. **Schedules**
- F. **Schedule book**
- G. **Weekly Updates**
  - 1. Turn in schedules (Thursdays by 12 PM)
  - 2. Update on Fridays as needed
  - 3. What to include
  - 4. Requesting Floats
  - 5. When to contact
  - 6. Supports

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Date	Time Spent	Employee	AOC
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**III. Human Resources Coordinator x212**

- A. **Policies and Procedures**
  - 1. Review all
  - 2. Maintain updated manuals
- B. **Approval of Timesheets**
- C. **Injury/Accident investigation Workers Compensation**
  - 1. Employee accident reports & packets
    - A. Back injury reports
    - B. What to write up
    - C. Routing/flow
  - 2. Investigation forms & Plan of Correction (POC)
  - 3. Filing

4. Workers compensation

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Date	Time Spent	Employee	Human Resources
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#### **IV. Nursing Coordinator x204**

##### **Nursing Training/Role**

- A. Being a liaison between team and physician**
- B. Coordinate and assess information, symptoms and concerns from all staff regarding medical issues**
  - a. Communicating concerns & when to contact
- C. Carry out Physician's orders**
- D. Health and safety issues, provide teaching to staff and clients**
- E. Maintain open communication with all levels of staff/ Direct Support Professionals- main source of information**
- F. First Aid kits (supply request)**
- G. Monitoring of BBP and infection control**
  - 1. Hand washing
  - 2. PPE's
  - 3. Proper Techniques
  - 4. Disinfection of surfaces
  - 5. Human Bites
- H. Assessing employee injuries**
  - 1. Safety issues & human bites
  - 2. Environmental issues
  - 3. Training
- I. Providing input regarding problem solving about health and safety (Forms used):**
  - 1. Medical appointment forms (SP responsibility at appt. & RS after appt.)
  - 2. Controlled Med Count Sheets – when to use
  - 3. Ohio Board of Nursing Delegation Law & Rule (Delegated nursing requirements)
  - 4. DODD – State of Ohio Law & Rule
  - 5. LOA meds/packing meds
    - A. Documentation
    - B. Location
    - C. Notification
    - D. Log
  - 6. Med Errors
  - 7. EIR's/UIR's
    - A. Routing
    - B. Forms
    - C. Who to contact
- J. Psychotropic Meds – Guardian consents**
- K. Pharmacy – Finney's & local pharmacy use**
  - 1. MAR reviews
  - 2. Transcription of medication
- L. Self-med assessment – on a continuum**
- M. Role of Nursing Team; Nurse's Aide job responsibilities/appointment running**
- N. Seizures**
- O. Confidentiality**
- P. How to contact nursing**
  - 1. DON/when to call
  - 2. NOC/when to call

##### **Miscellaneous Medical**

- A. Medical Appointments**
  - 1. Medical appointment forms
- B. Psychologist/psychiatrist**
- C. Check-ups/physicals**
- D. Audiological**

- E. **Blood work-checking levels for diabetics & routine blood draws**
- F. **Eyeglass repairs**
- G. **Other adaptive equip. repairs**
- H. **Documenting in nurses notes; medical record**
- I. **Communicate concerns to nursing/when to contact**
- J. **First Aid kit/supply request**
- K. **BBP Kit**
- L. **MARS**

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Date	Time Spent	Employee	Nursing Coordinator
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**VII. Staff Development Coordinator x206**

**Training Guidelines**

- A. Training and Cross-training checklists (ICF & Supported Living)
- B. Training and Cross-training guidelines
- C. Flow- to SDC
- D. Persons responsible for training

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Date	Time Spent	Employee	Staff Development Coordinator
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**VIII. Social Service Coordinator x205**

**Social Services**

- A. **Social Service Responsibilities and notification**
  - 1. Payeeship
  - 2. Authorized Rep
  - 3. PMHA
  - 4. Medicaid Buy-in Program
  - 5. Communication in regards to benefits (SSA/SSI, food stamps)
- B. **Activity calendar**
- C. **Sign in/Sign out sheets**
- D. **Therapeutic leave sheet**
- E. **Monthly fire drill forms**
- F. **Monthly tornado drill forms (April through October)**
- G. **Fire safety training for residents/Severe weather**
- H. **Tracking Individuals wages/income**
- I. **Monitoring of consumer balances**
- J. **Annual client right/consent packets**
- K. **Major Unusual/Unusual Incidents**
  - 1. Unusual Incident
  - 2. Major Unusual Incident/Rule
    - A. Identification (What constitutes a MUI)
  - 3. Reporting & Unusual Incident Reports (UIR) completion and timelines
  - 4. Plan of Corrections
  - 5. Role of UI/MUI Committee and chairperson
  - 6. Investigations
  - 7. Notifications
  - 8. When to contact Case Management and guardian

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Date	Time Spent	Employee	Social Service Coordinator
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**IX. Administrative Assistant**

- A. Mail box (office)
- B. Monthly Calendar
- C. Scheduling conference rooms
- D. Supply closet/Request
- E. Scheduling the agency car

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Date	Time Spent	Employee	Administrative Assistant
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**X. Program Coordinator (330) 296-2851**

**Responsibilities and Expectations**

**A. Responsibilities and expectations of job (Role of a Supervisor)**

**B. Work schedules and monthly requirements**

- 1. Monthly schedule in the system with updates
- 2. Hours expectation
- 3. Changes to schedule
- 4. RFTO process
- 5. Holiday break coverage of program
- 6. Client time

**C. Acceltrax**

- 1. Reporting work as management
- 2. Reporting work as a support professional

**D. Communication**

**E. Teamwork**

**F. Training staff**

- 1. New staff Training
- 2. Cross Training
- 3. Ongoing Training

**G. House Operations**

- 1. Cleanliness
- 2. Site Observations
- 3. Identifying and addressing the needs of the site

**I. Dress code**

**J. Schedule Requirements**

**K. POC for incidents**

**L. Reimbursement for expenses**

**M. Staff Supervision, Expectations & Site Visits**

- 1. Routine Visits
- 2. Observation & Interactions (house staff & clients)
- 3. Role Modeling
- 4. Dignity
- 5. Risk
- 6. Sensitivity
- 7. Respectful Interactions
- 8. Active Treatment
- 9. Documentation, findings & follow-up

**N. Monthly Progress Notes**

**O. Book Reviews:**

- 1. Finances: SPC & RS duties
  - A. Money count
  - B. Checking receipts

- C. Checking correct addition and subtraction
- D. Checking for SPC's initials during check
- E. RS signature/initials
- F. Individuals' signatures on ledgers
- 2. Skill developments/outcomes
- 3. Service documentation report
- 4. Contact notes
- 5. MARS
- 6. House calendar
  - A. Content
  - B. Turn-in
- 7. Fire safety training book

**Weekly/Monthly Duties**

**A. Weekly Turn-In**

- 1. Receipts (coded and initialed if applicable)
- 2. Time sheets-Biweekly
- 3. Phone logs
- 4. Petty cash forms x 4
- 5. Paycheck stubs
- 6. Income summaries
- 7. Updated staff schedule (include management names in any open shifts)
- 8. Staff meeting minutes (including sign in sheet)
- 9. Dietary (ICF)
- 10. Weights - explanation of a 3 lb. difference (ICF)
- 11. Incidentals (ICF)
- 12. Supplies [bi-weekly] (ICF)
- 13. MAR weekly monitoring sheets – review/follow-up (SL)

\_\_\_\_\_  
PC/Trainer initials

\_\_\_\_\_  
Employee initials

**B. Monthly turn-in**

- 1. Mileage reimbursement, review mileage sheets monthly (employee and agency vehicle)
- 2. Sign in/out sheets
- 3. Personal funds summary (non-collective account)
- 4. Individual schedule for the following month (turned in to supervisor by the 25<sup>th</sup> of the month prior)
- 5. Census (ICF)

**C. Fire/Tornado Drills**

- 1. Fire Drills- Every month (one per shift per quarter)
- 2. Resident fire safety training (monthly)
  - A. Expectations
  - B. Procedure
  - C. Documentation
- 3. Fire box procedure
- 4. Fire extinguisher (current & available)
- 5. Annual sprinkler system check
- 6. Tornado Drills-one per month throughout tornado season
- 7. Evacuation procedure (tornado and fire) with plans posted in each facility
- 8. Drill forms
- 9. Drill doc sheet-yearly
- 10. File for licensure
- 11. Doors for proper closure
- 12. Closet clearance
- 13. Monthly maintenance checklist
- 14. Ice/snow removal
- 15. Yard maintenance

**Schedules, Meetings & Planning**

**A. Staffing Schedules**

- 1. Posting staff schedules within the sites and keeping updated
- 2. Vacations for employees

3. RFTO's (three days in advance)
4. Holidays
5. Maintaining updated schedules

**B. Agency Meetings**

1. Process Meetings & Program Services
2. Management meeting
3. Seminars/In-services
4. Attendance & timeliness important
5. Staff Meetings – minutes/routing
6. SPC Meetings
7. RS Meetings
8. General Expectations

**C. Day Program Responsibilities**

1. Day Program concerns addressed
2. Transportation
3. Day Services, Workshop, Enclave, Supported Employment
4. Day Program Calendar (PI, CADS, PEACE, UDS, etc.)
5. Active treatment at day program (ICF)

**D. Recreation Calendars**

1. Requirements
2. Obtaining information
3. Coordinating with other homes and nursing
4. Due Date
5. Flow
6. SPA for staff admissions

\_\_\_\_\_  
PC/Trainer initials

\_\_\_\_\_  
Employee initials

**E. FYI Calendars**

1. Contain dates for trash, recycling
2. Routine events

**F. Outside Agencies**

1. Day Programs, Vocational Programs, Community Employment (BVR)
2. Adaptive equipment suppliers
3. Routine doctors
4. Bowling/Special Olympics
5. Town Hall II & help hotline
6. Human Services
  - A. Appointments
    1. Responsibility of RS/Staff
    2. Responsibility of PC/paperwork needed
7. Outside resources (PMHA...)

**Individuals**

- A. Appearance
- B. Choices
- C. Rights and responsibilities
- D. Respectful Interactions
- E. Strengths and needs
- F. Age appropriateness
- G. Community integration
- H. Self esteem
- I. Self-advocacy
- J. Consumers as employers
- K. IPP/ISP (Individual's Plan)
  1. Philosophy of the Plan
  2. Purpose of the Plan
  3. Format of Plan
  4. Programs
  5. Documentation of services
  6. Frequency of changes to the Plan

7. Components of the Plan/Format
8. Annuals & Special Team Meetings
  - A. Preparation for Team Meetings - SLAA support
  - B. Meeting with PC prior to annual meetings
9. Team Process
10. Skills Development
11. Team Members
  - A. SSA
  - B. APSI-Guardian
  - C. Communication
  - D. Family Members
  - E. Advocates
  - F. Day Program Members
12. Follow-through

### **Individuals Direct Service and Assistance**

- A. Household cleaning
- B. Meal preparation
- C. Hygiene
- D. Health and safety of the individuals
- E. Assistance with budgeting and finances
- F. Community integration and leisure's
- G. Social interactions with family and friends

### **Miscellaneous Medical**

- A. Medical appointments
  1. Medical appointment forms
    - A. Routing of form & follow-up of medical appointment
  2. Medical appointment books
    - A. Set-up and SPC oversight
    - B. Updated, neat, orderly
  3. Scheduling
  4. Running
  5. Tracking
- B. Administering medications (consumer needs/documentation)
- C. Packing medications
- D. Filling medications
- E. PRN (standing order medications)
- F. Med Times
- G. Checking in monthly medications, MAR, physicians' orders

### **Adaptive Equipment (PC & RS)**

- A. Appropriate use
- B. Maintenance & repairs
- C. Recommendations & follow-up
- D. Current/Properly assisting the consumer
- E. Medicaid responsibilities/agency/individual
- F. Responsibilities in purchasing & SPA
- G. Staff training on use

### **Regulatory Agencies**

- A. Regulations for Medicaid
- B. Rules for licensure
- C. Approximate arrival time
- D. Medicaid cards
- E. Fire rating

### **Case Management/SSA**



- A. Communication
- B. Role of Case
- C. Client Rights
- D. Confidentiality
- E. When to contact

**Incident/Accident Reports- Human Resources**

- A. Medical accident reports (residents)
- B. Employee accident reports
- C. Back injury reports
- D. Injury packets
- E. Incident reports
- F. Flow
- G. Plan of correction/ Investigation
- H. Filing
- I. Major Unusual Incidents & UIRs
  - 1. Identification/ What constitutes an MUI
  - 2. Reporting
  - 3. Investigation
  - 4. Notification
  - 5. When to contact Case Management and guardian
  - 6. Documentation and follow-up
  - 7. Reviewer section & POC 1
  - 8. POC 2
  - 9. PEACE reports

**Supported Living**

- A. Supported Living Design
  - 1. HUB Setup
  - 2. Role of SPC
  - 3. Expectations of growth
- B. **Filing**
  - 1. Main Books
  - 2. Finances
  - 3. Cabinet

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Date	Time Spent	Employee	Program Coordinator
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**XI. Food Services (330) 296-2231**

**Group Homes Dietary (ICF)**

- A. Meat delivery (be home)
- B. Meat pulls
- C. Canceling orders, controlling stock
- D. Supply/Grocery Incidentals/Packing lists
  - 1. Forms used
  - 2. How to complete
  - 3. When due
  - 4. Pick up of groceries
  - 5. Return of boxes
  - 6. Packing slip/listing items not needed

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Date	Time Spent	Employee	Dietary Clerk
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**XIII. Administrative Assistant x208**

**Supported Living**

**A. End of the month turn in**

- 1. Turn in completed paperwork process
- 2. Tracking of completion – report given to PC
- 3. Filing once turned in and tracked

**B. Binders at SL Sites (Review each and how to setup)**

- 1. Finance book
- 2. Site book
- 3. Individual books (ISP)
- 4. Drill book – refer to Page 8 (C. Fire/Tornado Drills)
- 5. Med Appt books

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Date	Time Spent	Employee	Program Coordinator
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I have completed the Expert DSP Training. I have read, understood and have access to my job description, client rights, and disaster and safety procedures. I have access to the policy manual and agree to abide by all current policies and procedures, as well as any, which may be developed in the future. I agree to keep all consumer related information confidential.

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Employee Signature

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Date