

PERSONAL CARE SERVICES PROGRAM

REGISTERED NURSE INITIAL & ANNUAL TRAINING VERIFICATION FORM

Employee Name:

Provider Agency:

I. **PC Registered Nurse Initial and Annual Training Requirements.** All PC Registered Nurses must complete all of the following training before providing services for payment and annually thereafter:

- 1) Person-Centered Planning: must use training provided by the OA.
- 2) Abuse/Neglect/Exploitation Identification: must use training by the OA.
- 3) CPR/First Aid Training (Certified trainers are exempt).

Training Topic	Date	Start Time/Stop Time	Total Time	Location of Training	Source	Registered Nurse Signature	Trainer Signature
Person-Centered Planning					OA Curriculum		
Abuse/Neglect/Exploitation Identification					OA Curriculum		
CPR Training		N/A	N/A		OA approved certifying agency		
First Aid Training		N/A	N/A				

**Must maintain professional license training requirements:

Time period that license is valid

Verification of Training: By signing this document, the Agency Director/designee verifies the Registered Nurse has completed all required training areas listed above.

Keep completed scored test with RN's name on it in file to demonstrate competency. For any tests with below average scores, document remediation taken to address this. If training was taken on Public Learning Center, keep copy of certificate of completion in file.