

**WV AGED AND DISABLED WAIVER PROGRAM
REGISTERED NURSE INITIAL & ANNUAL TRAINING VERIFICATION FORM**

Employee Name:

Provider Agency:

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

- a) **Person-Centered Planning/Service Plan Development:** may use training provided by WV BoSS or develop your own with the same components approved by WV BoSS.* Initial and annually thereafter.
- b) **Abuse/Neglect/Exploitation Identification:** may use training provided by WV BoSS or develop your own with the same components approved by WV BoSS.*Initial and annually thereafter. (Option to test out of annual training with 70% competency. If unsuccessful, the entire training must be completed).
- c) **HIPAA:** . may use training provided by WV BoSS or develop your own with the same components approved by WV BoSS.* Initial and annually thereafter. (Option to test out of annual training with 70% competency. If unsuccessful, the entire training must be completed).

Training Topic	Date	Start Time/Stop Time	Total Time	Location of Training	Source	Certificate or Test Score	RN Signature	Trainer Signature
Person-Centered Planning					BoSS Curriculum			
Abuse/Neglect / Exploitation identification					BoSS Curriculum			
HIPAA					BoSS Curriculum			

Registered Nurses 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. For any internet training that included post-test, keep certificate of completion in file.

May 1, 2023

