

## CHOICES WORKER TRAINING CHECKLIST FOR CONSUMER DIRECTION

Please utilize this form to indicate if training in all areas for workers has been completed. Remember to submit all tests to PPL and keep a copy for your records.

**Employee Name:** \_\_\_\_\_

Training topic to be covered	Yes
1. Overview of CHOICES and Consumer Direction program	<input type="checkbox"/>
2. Understanding the role of members and representatives in Consumer Direction	<input type="checkbox"/>
3. Understanding the role of the care coordinator, the supports broker and the FEA	<input type="checkbox"/>
4. Understanding the role of the worker in Consumer Direction	<input type="checkbox"/>
5. CPR/First Aid	<input type="checkbox"/>
6. Caring for the elderly and disabled populations	<input type="checkbox"/>
7. Abuse and neglect prevention and reporting	<input type="checkbox"/>
8. Fraud and abuse prevention and reporting	<input type="checkbox"/>
9. Critical Incident Reporting	<input type="checkbox"/>
10. Understanding the requirements for specialized training for workers regarding member's individualized service needs and preferences	<input type="checkbox"/>
11. Understanding that if the member elects to self-direct health care tasks that the member/representative will provide training specific to the member's needs	<input type="checkbox"/>
12. General training on blood-borne pathogens	<input type="checkbox"/>
13. Understanding that the worker can request additional training on any of these items from the supports broker.	<input type="checkbox"/>
14. Understanding that the member, care coordinator or supports broker can require additional and refresher training on any of these items.	<input type="checkbox"/>
15. Understanding the timing for the authorization process, what authorizations are and that worker will not be paid for working hours that are not authorized	<input type="checkbox"/>
16. Understanding the member/ representative will set a worker's rate of pay and determine the schedule of workers.	<input type="checkbox"/>

17. Use of the BetterOnline™ and Time4Care™ electronic timesheet systems, and use of paper timesheets. Understanding timesheets will be used for capturing worker time and that workers will be paid based on Employer approved timesheets.	<input type="checkbox"/>
18. Understanding that worker is responsible for accurate recording of time worked on timesheets (electronic or paper) and submitting the completed timesheet to Employer for approval by pay period deadline date.	<input type="checkbox"/>
19. Understanding of the daily notes requirement	<input type="checkbox"/>

\_\_\_\_\_  
 CHOICES worker Signature

\_\_\_\_\_  
 CHOICES worker Printed Name

\_\_\_\_\_  
 Date