



IFS MANUAL – APPENDIX M

PROVIDER QUALIFICATIONS AND TRAINING VERIFICATION RECORD
For Employees Hired Directly by Individuals and Families

Name of Employee:	Name of Individual Receiving Services:
Case Manager:	

IFS Waiver Services To Be Provided (please check all that apply:)

<input type="checkbox"/> Personal Support <input type="checkbox"/> Respite <input type="checkbox"/> Supported Employment (group or individual) <input type="checkbox"/> Individualized Home Support <input type="checkbox"/> Individualized Day Support	<input type="checkbox"/> Adult Companion Services <input type="checkbox"/> Consultative Services <input type="checkbox"/> Interpreter Services <input type="checkbox"/> Transportation <input type="checkbox"/> Independent Support Broker <input type="checkbox"/> Individual Goods and Services
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PART 1: PRE HIRE STANDARD REQUIREMENTS

Requirement Timeframe	Standard Qualifications, Competence or Training Required	Date Verified
Information to be Reviewed By the Employer with the Job Candidate PRIOR TO EMPLOYMENT	The job candidate must meet the required age for the waiver service to be delivered. <ul style="list-style-type: none"> 18 Years of Age for most waiver services 16 Years of Age (<i>*in home Respite only-with no driving of consumers</i>) 21 Years of Age (<i>Supported Employment Only</i>) 	(I9) By employer
	The job candidate must pass all Criminal Background Policy and Requirements	(Criminal Background Check documentation) By FI
	The job candidate cannot be hired if listed on the DDS Abuse and Neglect Registry Check	(Registry Check documentation) By FI
	The job candidate must pass all the Driver’s License Check Policy Requirements if driving is a job requirement	(Motor Vehicle documentation) By FI
	The job candidate must be proficient in English and other languages as required, understand cultural nuances and emblems, understands an interpreter’s role (Interpreter Services Only)*	(Employer Interview) By Employer
	The job candidate must meet all Professional Licensure/Certification or Appropriate Training as Required (Clinical Behavior Support and Health Care Coordination Services Only)*	(License Documentation) BY FI
	The job candidate must meet the Independent Support Broker Requirements as Applicable (* Independent Support Broker Services Only)	(Resume) By FI
	The job candidate must demonstrate an ability to Complete Record Keeping	(Employer Interview)
	The job candidate must demonstrate an ability to Communicate Effectively with the Individual and Family	(Employer Interview)
Fact Sheets	The job candidate must verify that they have read and understand the following DDS Fact Sheets: <ul style="list-style-type: none"> Approved and Prohibited Physical Management Techniques Incident Reporting Individual Planning 	(Job Candidate Signature on this form)
	The job candidate must verify that they have read and understand the False Claims Act Procedure.	(Job Candidate Signature on this form)

PART 2: ADDITIONAL AND SPECIFIC REQUIREMENTS (As Identified In The Individual Plan)

Additional and Specific Competence or Training to be Completed by an employee if required in the IP (if applicable)	Employer Notifies Job Candidate of Training Completion Requirement Timeframe (√)				Date Verified
Medication Administration (*if required by policy/procedure)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		(Training Certificate)
Positive Behavior Supports (*if restraint is required)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		(Training Certificate)
Other Training Required in the IP:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		(Employer Interview or Training Certificate as required)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

I have reviewed all of the Pre-Hire requirements listed on page 1 and 2 of this document with

(_____).
Name of Job Candidate

Signature of the Employer

Date

I have reviewed all of the Pre-Hire requirements listed on page 1 and 2 of this documents listed above with my potential employer and understand the information that has been presented to me. I also understand that I cannot begin employment until my employer's FI has verified that I have met all of the Pre-Hire requirements.

Signature of the Employee

Date

*** 90 Day CDS E-Learning Learning Requirements**
Your employer's FI will send you information about how to access the CDS E-Learning system once your Pre-Hire requirements have been verified.