

Developmental Disabilities Division Staff Training Policy Exceptions & Frequently Asked Questions Coronavirus (COVID-19)

Revised: April 7, 2021

Purpose:

During the COVID-19 event, exceptions to our normal practices and policies will be allowed. Below is guidance to address the exceptions regarding staff training requirements under PI 18-05. These exceptions will only be in place **temporarily**.

We continue to recommend that providers follow the guidelines provided by the CDC, Department of Health and the ND Governor's Office regarding community outings, events and visitors. Prior to staff entering any facility, training environment or the setting in which you are going to work, staff should complete the recommended assessment checklist of the CDC and DoH questions.

If an agency is not able to complete in-person training according to the CDC guidelines, training may be completed using HIPAA/PHI compliant remote technology (e.g. Microsoft Teams or other remote learning platforms). The provider agency must maintain a roster of the classes taught, names of staff completing the training, date of the training, and the instructor's signature. Since staff are completing training remotely, it is the instructor's responsibility to complete this documentation and turn it in to the appropriate certified regional trainer.

Minimum requirements:

Must be completed **prior** to staff assuming sole responsibility for the person(s):

- 1. SE/ANE and GER reporting; and,
- 2. Rights (discuss pre-COVID and current situation); and,
- 3. Client specific/site specific training (i.e. OSP/BIPs, seizure protocols, etc.); and,
- 4. Medication Administration (only if the staff will be passing medications); and,
- 5. HIPAA/PHI; and,
- 6. Hand washing/OSHA/CDC recommendations; and,
- 7. Agency specific guidelines; and,
- **8.** Initial CPR/1st aid will allow curriculum to be taught remotely. **However, staff must complete the hands-on portion with certified trainer prior to working alone**;

The hands-on portion may be completed using remote technology if appropriate supplies are able to be used utilizing CDC guidelines and acceptable by the certifying entity (i.e. Red Cross, American Heart Association, North Dakota Safety Council).

- 9. Therapeutic responses (TR) without hands-on portion. Materials may be taught using remote technology.
 - a. Staff that will be working with people who exhibit behavior challenges:
 - i. If working in a setting where staff have received the hands-on training, the TR video should be shown so that staff have a basic knowledge in how to perform the physical techniques. Physical techniques should not be implemented by staff that do not have hands-on training. Staff with hands-on training can request assistance from the staff without hands-on training if the situation warrants it. However, the staff with hands-on training should take the lead.
 - ii. If working in a setting where staff will be working alone, hands-on training will need to be completed prior to working alone.
 - iii. Once the state of emergency is lifted, the staff will have 90 days 6 months to complete the hands-on demonstrations with the course instructor in the respective area.

*All other orientation and position-based competencies training for new hires listed in PI 18-05 that was not completed due to the state of emergency must be completed within 90 days 6 months after the federal declaration has been lifted.

DEVELOPMENTAL DISABILITIES DIVISION

1237 W Divide Ave Suite 1A | Bismarck ND 58501-1208

701.328.8930 | Fax 701.328.8969 | 800.755.8529 | 711 (TTY) | www.nd.gov/dhs

Q1: Are agencies still able to conduct in person orientation for new employees?

A: Yes, this is at the discretion of the provider. It is recommended that all providers follow the recommended CDC guidelines, Federal and State recommendations (i.e. wash hands before and after training; make sure the rooms are cleaned; have hand sanitizer available; limit class sizes etc.).

Q2: Will legal decision makers hired by a DD licensed provider during this pandemic need to complete the necessary training?

A: Yes, they are required to complete the minimum requirements listed above. All other orientation and position-based competencies will not be required, unless the legal decision maker chooses to maintain their employment with the agency after the pandemic.

Q3: What about recertification and annual training due dates for seasoned/veteran staff?

A: Yes, annual training due dates will be extended for up to 90 days 6 months after the emergency has been lifted. During this COVID-19 pandemic, agencies must keep track of staff training that will be overdue and document the reasons for these delays in the person's file.

Q4: Will there be extensions granted for module completion to meet the Position-Based Competencies and Module Requirements per PI 18-05?

A: Yes, this will allow all staff to complete the modules after the pandemic has been lifted and the agency is back to business as usual. Agencies must document why the staff was late and when the agency expects them to have it completed. Follow the semi-annual training report guidelines for extensions for staff.

For those that are in the middle of completing their modules, and staff have shifted their focus to working additional hours to assure the health and safety of the people served, an extension will be allowed. Trainers will need to record the reason for any delays on their semi-annual reports, noting that due to COVID-19, staff was not able to complete the required modules along with the anticipated date of completion.

Q5: Will there be extensions granted for module completion in relation to job specific requirements (i.e. QDDP or BA modules)?

A: Yes, the department will allow staff (i.e. QDDP, behavioral analyst etc.) to complete the appropriate job-specific modules within six (6) months after the state of emergency ending.

Q6: Will the medication administration practicum be able to be completed virtually?

A: Yes, if the nurse is not able to observe the med pass in person, this may be completed virtually at the discretion of the provider. If this is the allowed, a current med certified staff needs to be present to oversee the process and the nurse observing virtually.