

CENTRAL STATE HOSPITAL
POLICY and PROCEDURE

SUBJECT: STAFF DEVELOPMENT and TRAINING

ANNUAL REVIEW MONTH: July

RESPONSIBLE FOR REVIEW: Director Staff Development & Training

LAST REVISION DATE: July 2009

I. POLICY

- A. PURPOSE: The Policy Staff Development & Training identifies the objectives, responsibilities and operating procedures for the staff development and training function . The policy is intended to complement and remain in compliance with the Department of Behavioral Health and Developmental Disabilities (DBHDD), DBHDD Facility System Protocol *Competency Assessment Plan*. This policy will serve as a guide for staff in effectively utilizing training and staff development resources, which are designed to help the hospital fulfill its' mission. Employees will be selected for training opportunities in accordance with stated staff development priorities and goals based on the individual employee's job requirements and job performance.
- B. APPLICABILITY: This policy is applicable to all CSH Departments and staff.
- C. DEFINITIONS: For the purposes of this policy, the following definitions are provided:
1. Staff Development. The process of providing educational support to employees and staff which results in the acquisition, improvement and application of performance enhancing knowledge and skills in the workplace.
 2. Training. The process that facilitates the acquisition of knowledge, skill and competency as a result of vocational or practical experiences.
 3. Training Plan: The annual CSH *Training Plan* will reflect the operational and clinical needs assessments, results of performance improvement activities, and ongoing training requirements reflecting licensure and accreditation standards.
 4. Orientation. A formalized program that introduces new and transferring employees to the organization and workplace, including the individual employee's duties and responsibilities in a specific work area.
 5. Inservice Training. Organized training activities specific to the employee's current job assignment, provided in the work area or a hospital training location. May include a combination of instruction, discussion and practice, or self-directed learning activities.
 6. Organized Training Activity. Planned activity generally including: (1) a pre-

established purpose or set of objectives, (2) a targeted group of employees and a training time frame (3) a course/program description and a written lesson plan, and (4) a planned method for evaluation of the effectiveness of the training.

7. On-Site Training. Training conducted at the employee's place of employment. As opposed to *Off-Site* training, away from the employee's usual place of work.
8. On-the-Job Training. Activities conducted by the supervisor or experienced staff at the place of employment – *On-Site*. This includes demonstrations and work trials, relating to the actual work process. Addresses: how the task is completed correctly, necessary documentation, safety rules, and why the work is necessary.
9. Outservice Training. *Off-Site* training activities, which involve short term, planned learning experiences, including workshops, conferences and professional meetings.
10. Continuing Education. Organized learning experiences designed to enhance the knowledge and competence of professional/licensed practitioners.
11. Rescheduled Work Time (for Educational Purposes). The procedure by which an employee may formally request and the supervisor secures approval for a temporary change to the employee's work schedule in order to allow the employee to attend an organized, personal development training activity away from the work area during usual scheduled work hours. Such training is on the employees' own time, at their own expense, and is not offered at the place of employment. For the non-exempt (FLSA) employee, the training cannot either be required by the employer nor be closely related to the current duties or responsibilities of the employee.
12. Mandatory Training. A required employee training activity based upon minimum competency standard as identified by the organization. Often associated with an annual training plan as necessary to remain in compliance with accreditation or licensure standards.
13. Training Methods. Techniques and strategies employed by the organization to train and orient staff. May include OJT, classroom instruction, self-directed training, and internet website - based instruction.
14. Training Needs Assessment. The process of evaluating both the individual employee's opinion about the need for training, and the opinion of the supervisor or Manager. Assessment may include direct employee and supervisor surveys, hospital operation data, function team findings or recommendations, customer survey, or performance improvement process information.
15. Training Evaluations. This process evaluates internal and external training courses. Evaluations include feedback from the employee/participant, the employee's supervisor, and the consumer where applicable.

D. POLICY STATEMENT:

The CSH Leadership Team recognizes the value of competent and motivated staff, focused on promoting the quality of client services at the hospital. This is enhanced through the cultivation, development and reinforcement of employees' knowledge and skills. Staff development and training opportunities, which complement the hospital's

mission and values, will be promoted and, as appropriate, sponsored. The enhancement of employees' knowledge and skills will foster job related competencies and contribute to an environment of quality care. A major goal for hospital training programs will be to address opportunities, which are identified by the organization's pursuit of Performance Improvement. CSH training and developmental opportunities will be offered in accordance with state and federal requirements, policies and guidelines, relevant accreditation standards, and equal opportunity principles.

E. DISCUSSION:

The CSH Staff Development and Training Function will organize its resources to address the strategic needs of Central State Hospital. This will include an annual Training Plan. The Training Plan will reflect operational and employee needs assessments, results of performance improvement activities, and ongoing training requirements reflecting licensure and accreditation standards. Training events will include orientation programs, inservice training, on-the-job-training, self-directed training, and continuing education opportunities through employee participation in workshops and seminars.

1. The responsibility for employee training and development rests with staff at all levels, e.g., managers, supervisors, employees and the SD&T Department. Managers and supervisors are responsible for the care of their clients and the job performance of subordinate staff. Managers must insure that all employees are qualified, competent and appropriately knowledgeable to meet the job responsibilities and performance expectations of their positions. Managers are to promote staff competence through effective orientation programs, regular and job specific inservice training, and by encouraging employees to participate in other performance enhancing, professional developmental training activities.

Employees have a responsibility to themselves and to the hospital to both maintain and develop their knowledge and skills, and exercise competence in their jobs. They are expected to share in the responsibility for their own career development. Employees should remain aware of available training resources, participate in setting their job expectations and performance goals, and make practical application of the training received in a manner that contributes to the organizational mission. When scheduled to attend training, employees are expected to arrive on time, to be attentive, to participate, and to remain in class until the end of the session. It is the role of the Staff Development and Training Department, in cooperation with the CSH Leadership Team and various hospital function teams and committees, to both formally and informally assess the training needs of employees. SD&T will work with division and department managers to design, acquire and deliver training programs, which address the identified needs of the organization and staff. SD&T will also evaluate the effectiveness of training activities, and maintain documentation of employee participation in training activities.

2. Orientation Training. A basic or *core* orientation program will be offered at least monthly, typically starting at the beginning of a pay period. The Human Resources Department will schedule newly hired staff for timely participation. The general orientation program will reflect the core content recommended by the DBHDD and additional components determined by the local hospital. The core program will involve up to seven days (56 hours) of basic training, to be completed prior to reporting to the work area. Facility management will determine the degree to which part time and temporary staff must complete or be exempted from parts of the orientation program or may have an individualized orientation (involving the completion of self-instructional packets) established for them.

Former employees with a service break of less than one (1) year are not required to attend the general orientation. Supervisors and managers may require such former employees to participate on a case-by-case basis. The SD&T Department will document and verify attendance for new employees in the general orientation program, and report program completions/incompletions to appropriate Service/Department/Office (SDO).

Volunteers and students who can be anticipated to be at the hospital for a period of time greater than two weeks, or those who may be without immediate staff supervision at any time, are required to complete the hospital orientation program prior to their beginning work area assignments. All students and volunteers who will be at the hospital for a period longer than two weeks and who will perform duties in client care areas are required to complete Mandt through the Advanced Technical level. The orientation will be specifically directed to the area of assignment and will include instruction in confidentiality, client rights, safety procedures and infection control.

3. Work Area/Unit Orientation: Service, Department and Office (SDO) managers will provide for an orientation for newly hired, recently transferred, and promoted employees assigned to their specific work area. This orientation program will cover: related work activities, job duties and responsibilities, safety policies and procedures, infection control, performance improvement, and other operational policies and procedures. The work area orientation will usually immediately follow the general and extended orientation sessions. There will be a written course description covering the contents of the work area orientation, which will be on file in the SD&T Department. Work area orientations will be documented on the Unit/Departmental Orientation Verification Form and the New Employee Departmental Orientation Form. (ref. DBHDD Competency Protocol)
4. Extended (Clinical) Orientation Programs: SD&T will offer an Extended/Clinical

Orientation Program for identified job categories, including all direct care nursing staff. This program will be specifically designed to meet the entry-level training needs for several direct care employee job classes including: CNAs/HSTs, registered nurses (RNs), and licensed practical nurses (LPNs). The Extended Orientation Program for each job group will have an established curriculum of required courses approved by the appropriate Clinical Director for the hospital, or designee.

5. Inservice Training. Inservice training will be offered by both SD&T trainers and other hospital/departmental trainers. All inservice training programs will have written objectives and a course outline, and will be on file with SD&T. Training rosters will be completed by all those in attendance (see attachment CSH form # 58, Training Roster). Inservice training will be work related and designed to increase job competencies or enhance the environment of care. Inservice instruction will normally be available on all work shifts, and time of attendance at inservice training is considered work time.
6. Outservice Training. CSH may provide financial assistance for employees to participate in off-campus training events. Such support is limited to those organized training activities where the activity involves job-related training, and where the skill or knowledge enhancement is considered important to the mission of the hospital. Financial assistance may be limited to approved paid time off (time only) from regular job duties to allow for participation in the outservice training, or the assistance may provide for partial or full expense reimbursement of registration fees, travel and subsistence costs and/or use of a state vehicle. Prior administrative approval is required for all forms of financial assistance, including cost reimbursement. All reimbursements are subject to limitations as specified in current Statewide Travel Regulations as published by the Department of Audits. (see attachment CSH form # 25, Application for Outservice Training)

Outservice training assistance is usually limited to programs within the State of Georgia; however, employees may request training "out-of-state" in unusual circumstances. Inter-State Travel Requests are completed using DHR Form # 5354, and require DBHDD approval. Refer to DHR EMPLOYEE TRAVEL& EXPENSE REIMBURSEMENT.

7. Continuing Education. Professional and Technical training may be available through inservice and outservice training opportunities. However, each professional staff member is personally responsible for obtaining the continuing education required for maintaining certification, license and credentials consistent with specifications of their job assignment.
8. Rescheduled Work Time. Employees may request a temporary rescheduling (flexible

schedule) for their work time that would enable them to participate in academic education or vocational training. Such rescheduling requires the prior recommendation of the Supervisor, Reviewing Official and the final approval of the Regional Hospital Administrator. The recommendation and approval will depend on the good work record of the employee, the availability of bona-fide work activities under supervision for the employee to accomplish at the rescheduled time, and the capacity of the work area to cover the responsibilities while the employee is away. Rescheduled work time must be reviewed and re-approved each academic term. (See attachment/CSH form # 724, Request for Rescheduled Work Time)

State Merit System and DBHDD Training. Training courses provided by the State Merit System or the DBHDD are to be considered as inservice training when offered at the hospital, and outservice training when offered away from the hospital. Usual approvals and/or application procedures would apply.

9. HR Function Team. The CSH HR Function Team will be charged to advise and assist the SD&T Department with certain planning and evaluation activities. The HR Function team may appoint a sub-group to specifically address a particular SD&T need or activity. Responsibilities to be addressed may include:
 - a. The training needs assessment process.
 - b. Identification of programs and objectives for training activities.
 - c. Assist with the evaluation of training effectiveness.
 - d. Publicizing of training opportunities for employees.
 - e. Communicate training needs and concerns to the Regional Hospital Administrator and Hospital Leadership Team.
10. Training Records. The SD&T Department manages a computerized record system, known as the Learning Management System or LMS. Reports covering the rate of compliance with training objectives will be provided to hospital administration. Training reports from LMS, summarizing individual training activities by employee name, should be used by supervisors in completing performance evaluations (PMFs).

The SD&T Department will distribute individual employee training statements to each department and/or work unit annually. A copy will be maintained in the employee's personnel (competency) file in the department or work unit as well as a copy in the employee training file in Staff Development & Training. A copy should be given to the employee. Additional copies of the employee training statements may be produced upon written request.

11. Program Evaluation. The SD&T Department at each hospital will complete quarterly and an annual summary reports covering the activities and accomplishments of the hospital's staff development and training program. The SD&T Department will utilize a wide range of methods to continuously evaluate the effectiveness of training

programs. These methods will include participant evaluation of classes, proficiency tests to measure mastery of course material, follow-up or impact evaluations on the job, and surveys of management staff regarding the effectiveness of training programs.

As directed by the DBHDD Facility System Protocol *Competency Assessment Plan* or specific Hospital Administration, the Hospital SD&T Department Director will prepare regular or special reports on training competency measures and performance monitoring. This will include data covering the number and percentage of staff completing orientation training, *on-going* annual training, behavioral management training, and any other training related information as required.

II. PROCEDURE

RESPONSIBILITY

ACTION

Director, SD&T

Continuously provide for needs assessment actions
Develop annual training Plan. (3rd Qtr.). Present to RHA and Leadership Team.

Secure appropriate approvals from RHA and Leadership Team. Advise staff through various publications as to available training. Implement training plan, and evaluate events and programs throughout plan year. Prepare quarterly and annual reports for RHA and Leadership Team. Prepare annual competency measures for report to governing body.

Regional Hospital Administrator

Evaluate, amend, and approve annual training plan.

Hospital Leadership Team

Review requests from staff to attend outservice training and utilize rescheduled work time for self-development. Foster attendance and participation in training activities.

Employee, Staff

Remain alert to training opportunities and individual training needs. Discuss needs with supervisor. Attend scheduled training classes/events, putting forth both the need and effort to maintain skills and acquire knowledge. Employ learned skills and acquired knowledge on the job. Help others by sharing information and knowledge.

III. REFERENCES:

DBHDD Facility System Protocol *Competency Assessment Plan*

APPROVED:

This policy has been approved by the CEO and CMO in September, 2009.

ATTACHMENTS:

Attachment 1 - Required Training for CSH staff/employees (FY 2004-2008)

Attachment 2 - Application for Outservice Training, CSH form #25

Attachment 3 - Request for Approval of Rescheduled Work Time, CSH form #724

Attachment 4 - Training Roster, CSH form #58

REQUIRED TRAINING: for CSH Staff/Employees/Updated July 2008

Training Classes covered in CSH Annual Training Plans- FY 2004 to present

Course Name/Topic	CSH #	Date	JC Standards	Required
Mandt Recertification	PC-SD 714	N/A	RI, Client Safety	All Staff
Mandt Advanced Conceptual	PC-SD 629	N/A	RI, Client Safety	Caregivers
Mandt Advanced Technical	PC-SD 630	N/A	RI, Client Safety	Caregivers
CSH Recovery Model Training	LD-SD 813	N/A	Rights & Ethics Patient Care	All Staff
Cultural Diversity	CE-OS 621	N/A	Patient Care	All Staff
Client Rights & Confidentiality	CLRSD-057	N/A	Rights & Ethics Leadership	All Staff
Risk Management/Incident Reporting System	CE-OS 820	N/A	Patient Rights & Patient Care	All Staff
Fire Safety	FRSSD-012	N/A	Environment of Care	All Staff
General Safety/ Client Safety	EC-SD 701	N/A	Environment of Care(IC) Client Safety	All Staff
Emergency Preparedness	PC-SD 501	N/A	Patient Care Client Safety	Caregivers
Age Population Specific	RI-SD 501	N/A	Rights & Ethics Age Specific	Caregivers
Positive Behavior Support	PC-SD 824	N/A	RI, Client Safety	All Staff
Infection Control:	IC-SD 603	N/A	Infection Control Client Safety	All Staff
Clinical Documentation	TBD	N/A	Patient Care & Safety	Caregivers
Maintaining the Medical Record	TBD	N/A	Patient Care & Safety	Caregivers
Active Treatment/Discharge Planning	CLRSD -043	N/A	RI, Client Safety	All Staff
Seclusion & Restraint	PC-SD 819	N/A	RI, Client Safety	Caregivers
Nutritional Management	RI-SD 604	Oct 05	Rights & Ethics Patient Care	Caregivers
End of FY 2008, Start of FY 2009↑				
Standards of Conduct/Ethics Conflict of Interest	HR-SD 701	Jan 07	Human Resources(HR) Rights & Ethics(RI)	All Staff
Infection Control-Personal Protective Equipment	IC-SD 703	Jan 07	Infection Control (IC) Client Safety (PC)	All Staff
Client Rights: Hygiene, bathing And Grooming	RI-SD 702	Jan 07	Rights & Ethics Age Specific (PC)	Caregivers
General Safety: Safety and The Environment of Care	EC-SD 701	Oct 06	Environment of Care(IC) Client Safety	All Staff
Client Rights: CSH Plan of Care	RI-SD 701	Oct 06	Rights & Ethics	Caregivers
Workforce Diversity	CE-SD 701	July 06	Rights & Ethics HR, Leadership (LD)	All Staff
Communication Skills: Legibility and Objectivity	PC-SD 621	July 06	Patient Care Client Safety	Caregivers
Client Rights: Personal Property &	RI-SD 606	July 06	Rights & Ethics	Caregivers

Attachment 1
Policy 7.01

Safety			Client Safety	
End of FY 2006, Start of FY 2007↑				
Minimizing the Risk for Choking	PC-SD 626	April 06	Patient Care Client Safety	Caregivers
Wheelchair Safety	PC-SD 627	April 06	Patient Care Client Safety	Caregivers
Sexual Harassment	CE-SD 607	Jan 06	HR, LD Rights & Ethics	All Staff
Infection Control: Preventing the Transmission of Germs	IC-SD 603	Jan 06	Infection Control Client Safety	All Staff
Confidentiality & Privacy	RI-SD 605	Jan 06	Rights & Ethics	All Staff
Mandt System- Relational	PC-SD 618	Jan 06	RI, Client Safety	All Staff
Mandt System- Technical	PC-SD 619	Jan 06	RI, Client Safety	Caregivers
Fire Safety-Emergency Alarms	EC-SD 602	Jan 06	Fire Safe/EOC	All Staff
Nutrition- A client's Right	RI-SD 604	Oct 05	Rights & Ethics Patient Care	Caregivers
Keeping up with Your Responsibilities	PC-SD 612	Oct 05	Client Safety Patient Care	Caregivers
Communication Skills – Asking the Right Questions	PC-SD 613	Oct 05	Patient Care Customer Service (LD)	All Staff
Client Rights: Restriction of Rights, When ?	RI-SD 601	July 05	Rights & Ethics Client Safety	Caregivers
Client Safety- Common Side Effects & Adverse Drug Reactions	PC-SD 601	July 05	Patient Care Client Safety	Caregivers
General Safety- Security in the Work Place	EC-SD 601	July 05	Environment of Care Client Safety, HR	All Staff
Start of FY 2006 ↑				
Client Rights- Depression & Aging	RI-SD 501	April 05	Rights & Ethics Age Specific	Caregivers
Emergency Response-First Aid/Heimlich Update "05	PC-SD 501	April 05	Patient Care Client Safety	Caregivers
The Fall Potential	PC-SD 502	April 05	Client Safety	Caregivers*
Hygiene and Cleanliness	IC-SD 501	April 05	Client Safety	Caregivers*
Client Rights: Privacy & Confidentiality (HIPAA)	CLRSD-061	Jan 05	Rights & Ethics Leadership	All Staff
General Safety: Client Care and Workplace Hazards	GNSSD-044	Jan 05	Environment of Care Human Resources	All Staff
Infection Control: Personal Protective Equipment & Sharps	INFSD-025	Jan 05	Infection Control Human Resources	All Staff
Customer Service: The Caring Way	CESD-096	Oct 04	Customer Service	All Staff
Client Rights: Respect & Dignity	CLRSD-060	Oct 04	Rights & Ethics	Caregivers
Minimizing the Risk for Choking	LSTSD-013	Oct 04	Patient Care/ Safety	Caregivers*
Bullying and Harassment	CESD-097	Oct 04	Rights & Ethics Human Resources	Caregivers *
Client Rights: Person to Person Skills	CLRSD-059	July 04	Rights & Ethics Patient Care	Caregivers
Fire Safety- Emergency Communication	FRSSD-015	July 04	Environment of Care	All Staff
Documentation- Eliminating Errors	CESD-091	July 04	Patient Care/Safety	All Staff
End of FY 2004, Start of FY 2005 ↑				
Client Safety- Lifting & Transfer	CESD-087	April 04	Patient Care, Safety	Caregivers

Attachment 1
Policy 7.01

Techniques				
First Aid: General Principles	LSTSD-012	April 04	Patient Care, Safety	Caregivers
Nosocomial Infections & Standard Precautions	INFSD-022	Jan 04	Patient Care, Safety	All Staff
Medical Equipment & Electrical Safety	GNSSD-040	Jan 04	Environment of Care Client Safety	All Staff
Cultural Factors in Care Giving	CLRSD-058	Jan 04	Patient Care	Caregivers
Client Rights and Confidentiality/ Privacy (HIPAA)	CLRSD-057	Jan 04	Rights & Ethics Leadership	All Staff
Anxiety Disorders	CEDSD-084	Oct 03	Patient Care	Caregivers
The Client's Right to be Informed	CLRSD-056	Oct 03	Rights & Ethics	Caregivers
Client Safety: The Client Safety Program	GNSSD-037	July 03	Patient Care, Safety Environment of Care.	All Staff
Fire Safety- Fire Safe Environment	FRSSD-012	July 03	Environment of Care	All Staff
Client Rights: Non-Behavioral Restraints	CLRSD-054	July 03	Patient Care, Safety	Caregivers
Start of FY 2004 ↑				

CENTRAL STATE HOSPITAL
Department of Behavioral Health and Developmental Disabilities

*REQUEST FOR APPROVAL OF RESCHEDULED WORK TIME
FOR ACADEMIC/VOCATIONAL EDUCATION*

I, _____, respectfully request consideration and approval for rescheduling my work hours in

order for me to attend _____ from _____ to _____. This will enable me to
(Name of School) (Actual Dates of Classes)

complete course work requirements towards a degree in _____ with
an (List)

expected graduation date of _____.
(Date)

Work Location _____ Phone # _____

Signature _____ Date _____

1. The proposed course/class schedule:

_____	_____	_____
(Course)	(Hr. Credit)	(Days/Time of Class)
_____	_____	_____
(Course)	(Hr. Credit)	(Days/Time of Class)

2. The proposed work schedule for this period is:

SUNDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 MONDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 TUESDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 WEDNESDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 THURSDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 FRIDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 SATURDAY From _____ To _____ From _____ To _____ = _____ Hrs.
 Total _____ Hrs.

Specify the benefit to the Facility of your completing this training program.: _____

***_Recommend: () Approval () Disapproval _____

_____	Supervisor	Date
Recommend: () Approval () Disapproval	_____	_____
	Reviewing Official/Dept.Dir.	Date
APPROVAL () Approval () Disapproval	_____	_____

