



General Staff Training Requirements

Rules and Resources are subject to change & were compiled January 2020

[481] CHAPTER 57 RESIDENTIAL CARE FACILITIES

<https://www.legis.iowa.gov/docs/iac/chapter/01-29-2020.481.57.pdf>

[441] CHAPTER 77 CONDITIONS OF PARTICIPATION FOR PROVIDERS OF MEDICAL AND REMEDIAL CARE

<https://www.legis.iowa.gov/docs/iac/chapter/01-29-2020.441.77.pdf>

[441] CHAPTER 78 AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL SERVICES

<https://www.legis.iowa.gov/docs/iac/chapter/01-29-2020.441.78.pdf>

[441] CHAPTER 79 OTHER POLICES RELATING TO PROVIDERS OF MEDICAL AND REMEDIAL CARE

<https://www.legis.iowa.gov/docs/iac/chapter/01-29-2020.441.79.pdf>

[441] CHAPTER 82 INTERMEDIATE CARE FACILITIES FOR PERSONS WITH AN INTELLECTUAL DISABILITY

<https://www.legis.iowa.gov/docs/iac/chapter/01-29-2020.441.82.pdf>

EMPLOYMENT MATRIX

(Note: This resource hasn't been updated to reflect the loss of funding for DirectCourse.)

https://dhs.iowa.gov/sites/default/files/Employment_Matrix.pdf?012920201815

HCBS Employment FAQ

https://dhs.iowa.gov/sites/default/files/FAQ_HCBS_Prevocational_and_Supported_Employment_Services_04_27_2018.pdf?012920201853

HABILITATION SERVICES PROVIDER MANUAL

<https://dhs.iowa.gov/sites/default/files/Habilitation.pdf?012920201934>

AMERIGROUP PROVIDER MANUAL

https://providers.amerigroup.com/ProviderDocuments/IAIA_ProviderManual.pdf

IOWA TOTAL CARE PROVIDER MANUAL

<https://www.iowatotalcare.com/content/dam/centene/iowa-total-care/PDF/Iowa%20Provider%20Manual%2007.25.19.pdf>

HOME- AND COMMUNITY-BASED SERVICES (HCBS) 2019 PROVIDER QUALITY MANAGEMENT SELF-ASSESSMENT

<https://dhs.iowa.gov/sites/default/files/470-4547.pdf?012920202048>

HCBS Training Requirements

Employment

77.37(16) Supported employment providers (*ID Waiver*)

d. Direct support staff providing individual or small-group supported employment or long-term job coaching services shall meet the following minimum qualifications in addition to other requirements outlined in administrative rule:

(1) Individual supported employment: bachelor's degree or commensurate experience, preferably in human services, sociology, psychology, education, human resources, marketing, sales or business. The person must also hold a nationally recognized certification (ACRE or College of Employment Services (CES) or similar) as an employment specialist or must earn this credential within 24 months of hire.

(2) Long-term job coaching: associate degree, or high school diploma or equivalent and 6 months' relevant experience. A person providing direct support shall, within 6 months of hire or within 6 months of May 4, 2016, complete at least 9.5 hours of employment services training as offered through DirectCourse or through the ACRE certified training program. The person must also hold or obtain, within 24 months of hire, nationally recognized certification in job training and coaching.

(3) Small-group supported employment: associate degree, or high school diploma or equivalent and 6 months' relevant experience. A person providing direct support shall, within 6 months of hire or within 6 months of May 4, 2016, complete at least 9.5 hours of employment services training as offered through DirectCourse or through the ACRE certified training program. The person must also hold or obtain, within 24 months of hire, nationally recognized certification in job training and coaching.

(4) Supported employment direct support staff shall complete 4 hours of continuing education in employment services annually.

77.37(26) Prevocational service providers

a. Providers of prevocational services must be accredited by one of the following:

(1) The Commission on Accreditation of Rehabilitation Facilities as an organizational employment service provider or a community employment service provider.

(2) The Council on Quality and Leadership accreditation in supports for people with disabilities.

b. Providers responsible for the payroll of members shall have policies that ensure compliance with state and federal labor laws and regulations, which include, but are not limited to:

(1) Subminimum wage laws and regulations, including the Workforce Investment Opportunity Act.

(2) Member vacation, sick leave and holiday compensation.

(3) Procedures for payment schedules and pay scale.

(4) Procedures for provision of workers' compensation insurance.

(5) Procedures for the determination and review of commensurate wages.

c. Direct support staff providing prevocational services shall meet the following minimum qualifications in addition to other requirements outlined in administrative rule:

(1) A person providing direct support without line-of-sight supervision shall be at least 18 years of age and possess a high school diploma or equivalent. A person providing direct support with line-of-sight supervision shall be 16 years of age or older.

(2) A person providing direct support shall not be an immediate family member of the member.

(3) A person providing direct support shall, within 6 months of hire or within 6 months of May 4, 2016, complete at least 9.5 hours of employment services training as offered through DirectCourse or through the Association of Community Rehabilitation Educators (ACRE) certified training program.

(4) Prevocational direct support staff shall complete 4 hours of continuing education in employment services annually.

Employment Training General Questions:

Who do you contact if you need an extension on getting their CESP exam?

You would want to reach out to [Kari Tietjen](#). Her information is below. The staff would need to have a disability impacting them when they are taking the test to receive reasonable accommodations. You can find out the process of requesting accommodations from Kari.

Kari Tietjen, M.Ed, CESP APSE National CESP™ Certification Director

kari@apse.org

301-279-0060

Under HCBS requirements for Job Coaches, we are aware that staff must obtain “Nationally Recognized Certificate of Completion of Job Coach Training”. We have been equating this to the completion of specific CES Online Job Coaching trainings. However, there’s no actual certificate received at the end of these trainings; just proof they’ve been completed. Is this proof of completion sufficient, or is there some sort of specific certification that these employees should be obtaining?

There is not really a nationally recognized certificate, more of state recognized certificate of completion, and yes, the CES coursework would meet the requirement.

At this time, the courses do not have to be ACRE approved, so the general CES would be acceptable for either job coaching and/or job development training requirements. The certificate of completion for job coaching or small group just needs to be the documentation to show completion from CES.

In addition to Relias and DirectCourse’s employment training options, other resources include:

Center for Social Capital

<http://www.acreducators.org/training-providers/griffin-hammis-associatesctr-social-capital-online>

Institute for Community Inclusion

<http://www.acreducators.org/training-providers/university-massachusetts-boston-institute-community-inclusion-0>

WISE - Washington Initiative for SE Online

<http://www.acreducators.org/training-providers/wise-washington-initiative-supported-employment-online>

US DOL has training options available

<https://www.careeronestop.org/FindTraining/find-training.aspx>

Virginia Commonwealth University has SE online courses:

https://www.vcu.edu/?utm_source=top-spelledout&utm_medium=branding&utm_campaign=brandingbar

ID Waiver

441-77.37(249A) Home- and community-based services intellectual disability waiver service providers.

Providers shall be eligible to participate in the Medicaid HCBS intellectual disability waiver program if they meet the requirements in this rule and the subrules applicable to the individual service.

The standards in subrule 77.37(1) apply only to providers of supported employment, respite providers certified according to subparagraph 77.37(15)“a”(8), and providers of supported community living services that are not residential-based. The standards and certification processes in subrules 77.37(2) through 77.37(7) and 77.37(9) through 77.37(12) apply only to supported employment providers and non-residential-based supported community living providers.

The requirements in subrule 77.37(13) apply to all providers. EXCEPTION: A person hired through the consumer choices option for independent support brokerage, self-directed personal care, individual-directed goods and services, or self-directed community support and employment is not required to enroll as a Medicaid provider and is not subject to the review requirements in subrule 77.37(13). Also, services must be rendered by a person who is at least 16 years old (except as otherwise provided in this rule) and is not the spouse of the consumer served or the parent or stepparent of a consumer aged 17 or under. People who are 16 or 17 years old must be employed and supervised by an enrolled HCBS provider unless they are employed to provide self-directed personal care services through the consumer choices option. A person hired for self-directed personal care services need not be supervised by an enrolled HCBS provider. Consumer-directed attendant care and interim medical monitoring and treatment providers must be at least 18 years of age.

The integrated, community-based settings standards in subrule 77.25(5) apply to all HCBS intellectual disability waiver service providers.

77.37(1) Organizational standards (Outcome 1). Organizational outcome-based standards for home- and community-based services intellectual disability providers are as follows:

- a. The organization demonstrates the provision and oversight of high-quality supports and services to consumers.
- b. The organization demonstrates a defined mission commensurate with consumer’s needs, desires, and abilities.
- c. The organization establishes and maintains fiscal accountability.
- d. The organization has qualified staff commensurate with the needs of the consumers they serve. These staff demonstrate competency in performing duties and in all interactions with clients.
- e. The organization provides needed training and supports to its staff. This training includes at a minimum:
 - (1) Consumer rights.
 - (2) Confidentiality.
 - (3) Provision of consumer medication.
 - (4) Identification and reporting of child and dependent adult abuse.
 - (5) Individual consumer support needs.
- f. The organization has a systematic, organization wide, planned approach to designing, measuring, evaluating, and improving the level of its performance. The organization:
 - (1) Measures and assesses organizational activities and services annually.
 - (2) Gathers information from consumers, family members, and staff.

(3) Conducts an internal review of consumer service records, including all major and minor incident reports according to subrule 77.37(8).

(4) Tracks incident data and analyzes trends annually to assess the health and safety of consumers served by the organization.

(5) Identifies areas in need of improvement.

(6) Develops a plan to address the areas in need of improvement.

(7) Implements the plan and documents the results.

g. Consumers and their legal representatives have the right to appeal the provider's implementation of the 20 outcomes, or staff or contractual person's action which affects the consumer. The provider shall distribute the policies for consumer appeals and procedures to consumers.

h. The provider shall have written policies and procedures and a staff training program for the identification and reporting of child and dependent adult abuse to the department pursuant to 441—Chapters 175 and 176.

i. The governing body has an active role in the administration of the agency.

j. The governing body receives and uses input from a wide range of local community interests and consumer representation and provides oversight that ensures the provision of high-quality supports and services to consumers.

77.37(23) Residential-based supported community living service providers.

a. The department shall contract only with public or private agencies to provide residential-based supported community living services.

b. Subject to the requirements of this rule, the following agencies may provide residential-based supported community living services:

(1) Agencies licensed as group living foster care facilities under 441—Chapter 114.

(2) Agencies licensed as residential facilities for mentally retarded children under 441—Chapter 116.

(3) Other agencies providing residential-based supported community living services that meet the following conditions:

1. The agency must provide orientation training on the agency's purpose, policies, and procedures within one month of hire or contracting for all employed and contracted treatment staff and must provide 24 hours of training during the first year of employment or contracting. The agency must also provide at least 12 hours of training per year after the first year of employment for all employed and contracted treatment staff. Annual training shall include, at a minimum, training on children's mental retardation and developmental disabilities services and children's mental health issues. Identification and reporting of child abuse shall be covered in training at least every five years, in accordance with Iowa Code section 232.69.

Habilitation:

Iowa's [Habilitation Services Provider Manual](#) can be found on the DHS website. [Iowa Administrative Code 441](#) that applies to Habilitation services are found in chapters, [77](#), [78](#) and [79](#).

Chapter 77.25(249A) is the conditions of participation for providers.

Chapter 78.27(249A) contains the amount, scope and duration of the service.

Chapter 79.1(249A) contains the payment methodology and records maintenance requirements.

441—77.25(249A) Home- and community-based habilitation services. To be eligible to participate in the Medicaid program as an approved provider of home- and community-based habilitation services, a provider shall meet the general requirements in subrules 77.25(2), 77.25(3), 77.25(4), and 77.25(5) and shall meet the requirements in the subrules applicable to the individual services being provided.

77.25(2) Organization and staff.

a. The prospective provider shall demonstrate the fiscal capacity to initiate and operate the specified programs on an ongoing basis.

b. The provider shall complete child abuse, dependent adult abuse, and criminal background screenings pursuant to Iowa Code section 249A.29 before employing a person who will provide direct care.

c. A person providing direct care shall be at least 16 years of age.

d. A person providing direct care shall not be an immediate family member of the member.

The MCO handbooks contain their requirements for this service, here are links to those handbooks:

[Amerigroup Behavioral Health](#) is in Chapter 6, starting on Page 60.

[Iowa Total Care Behavioral Health](#) doesn't have its own chapter.

Children's Mental Health:

441—77.46(249A) HCBS children's mental health waiver service providers.

HCBS children's mental health waiver services shall be rendered by provider agencies that meet the general provider standards in subrule 77.46(1) and the integrated, community-based settings standards in subrule 77.25(5) and also meet the standards in subrules 77.46(2) to 77.46(5) that are specific to the waiver services provided. A provider that is approved for the same service under another HCBS Medicaid waiver shall be eligible to enroll for that service under the children's mental health waiver.

77.46(1) General provider standards. All providers of HCBS children's mental health waiver services shall meet the following standards:

- a. Fiscal capacity. Providers must demonstrate the fiscal capacity to provide services on an ongoing basis.
- b. Direct care staff.
 - (1) Direct care staff must be at least 18 years of age.
 - (2) Providers must complete child abuse, dependent adult abuse, and criminal background screenings pursuant to Iowa Code section 249A.29 before employment of a staff member who will provide direct care.
 - (3) Direct care staff may not be the spouse of the consumer or the parent or stepparent of the consumer.

77.46(3) Family and community support services providers.

- a. Qualified providers. The following agencies may provide family and community support services under the children’s mental health waiver:
 - (1) Behavioral health intervention providers qualified under 441—77.12(249A).
 - (2) Community mental health centers accredited in good standing as providers of outpatient psychotherapy and counseling under 441—Chapter 24.
- b. Staff training. The agency shall meet the following training requirements as a condition of providing family and community support services under the children’s mental health waiver:
 - (1) Within one month of employment, staff members must receive the following training:
 - 1. Orientation regarding the agency’s mission, policies, and procedures; and
 - 2. Orientation regarding HCBS philosophy and outcomes for rights and dignity found in 77.36(1)“c” for the children’s mental health waiver.
 - (2) Within four months of employment, staff members must receive training regarding the following:
 - 1. Serious emotional disturbance in children and provision of services to children with serious emotional disturbance;
 - 2. Confidentiality;
 - 3. Provision of medication according to agency policy and procedure;
 - 4. Identification and reporting of child abuse;
 - 5. Incident reporting;
 - 6. Documentation of service provision;
 - 7. Appropriate behavioral interventions; and
 - 8. Professional ethics.
 - (3) Until a staff member receives the training identified in subparagraphs (1) and (2), the staff member shall not provide any direct service without the presence of experienced staff.
 - (4) Within the first year of employment, staff members must complete 24 hours of training in children’s mental health issues.
 - (5) During each consecutive year of employment, staff members must complete 12 hours of training in children’s mental health issues.

77.46(5) Respite care providers. a. Qualified providers. The following agencies may provide respite services under the children’s mental health waiver:

- (1) Providers certified or enrolled as respite providers under another Medicaid HCBS waiver.
 - (2) Group living foster care facilities for children licensed in good standing by the department according to 441—Chapters 112 and 114 to 116.
 - (3) Camps certified in good standing by the American Camping Association.
 - (4) Home health agencies that are certified in good standing to participate in the Medicare program.
 - (5) Agencies authorized to provide similar services through a contract with the department of public health (IDPH) for local public health services. The agency must provide a current IDPH local public health services contract number.
 - (6) Adult day care providers that are certified in good standing by the department of inspections and appeals as being in compliance with the standards for adult day services programs at 481—Chapter 70.
 - (7) Assisted living programs certified in good standing by the department of inspections and appeals.
 - (8) Residential care facilities for persons with mental retardation licensed in good standing by the department of inspections and appeals.
 - (9) Nursing facilities, intermediate care facilities for the mentally retarded, and hospitals enrolled as providers in the Iowa Medicaid program.
- b. Staff training. The agency shall meet the following training requirements as a condition of providing respite care under the children’s mental health waiver:
- (1) Within one month of employment, staff members must receive the following training:
 1. Orientation regarding the agency’s mission, policies, and procedures; and
 2. Orientation regarding HCBS philosophy and outcomes for rights and dignity for the children’s mental health waiver in 77.46(1)“c.”
 - (2) Within four months of employment, staff members must receive training regarding the following:
 1. Serious emotional disturbance in children and provision of services to children with serious emotional disturbance;
 2. Confidentiality;
 3. Provision of medication according to agency policy and procedure;
 4. Identification and reporting of child abuse;
 5. Incident reporting;
 6. Documentation of service provision;
 7. Appropriate behavioral interventions; and
 8. Professional ethics.
 - (3) Until a staff member receives the training identified in subparagraphs (1) and (2), the staff member shall not provide any direct service without the oversight of supervisory staff and shall obtain feedback from the family within 24 hours of service provision.
 - (4) Within the first year of employment, staff members must complete 24 hours of training in children’s mental health issues.

(5) During each consecutive year of employment, staff members must complete 12 hours of training in children's mental health issues.

Brain Injury:

441—77.39(249A) HCBS brain injury waiver service providers.

Providers shall be eligible to participate in the Medicaid brain injury waiver program if they meet the requirements in this rule and the subrules applicable to the individual service. Beginning January 1, 2015, providers initially enrolling to deliver BI waiver services and each of their staff members involved in direct consumer service must have completed the department's brain injury training modules one and two within 60 days from the beginning date of service provision, with the exception of staff members who are certified through the Academy of Certified Brain Injury Specialists (ACBIS) as a certified brain injury specialist (CBIS) or certified brain injury specialist trainer (CBIST), providers of home and vehicle modification, specialized medical equipment, transportation, personal emergency response, financial management, independent support brokerage, self-directed personal care, individual-directed goods and services, and self-directed community supports and employment. Providers enrolled to provide BI waiver services and each of their staff members involved in direct consumer service on or before December 31, 2014, shall be deemed to have completed the required training.

Services shall be rendered by a person who is at least 16 years old (except as otherwise provided in this rule) and is not the spouse of the consumer served or the parent or stepparent of a consumer aged 17 or under. People who are 16 or 17 years old must be employed and supervised by an enrolled HCBS provider unless they are employed to provide self-directed personal care services through the consumer choices option. A person hired for self-directed personal care services need not be supervised by an enrolled HCBS provider. A person hired through the consumer choices option for independent support brokerage, self-directed personal care, individual-directed goods and services, or self-directed community support and employment is not required to enroll as a Medicaid provider and is not subject to review under subrule 77.39(11). Consumer-directed attendant care and interim medical monitoring and treatment providers must be at least 18 years of age.

In addition, behavioral programming, supported community living, and supported employment providers shall meet the outcome-based standards set forth below in subrules 77.39(1) and 77.39(2) evaluated according to subrules 77.39(8) to 77.39(10), and the requirements of subrules 77.39(3) to 77.39(7). Respite providers shall also meet the standards in subrule 77.39(1).

The integrated, community-based settings standards in subrule 77.25(5) apply to all HCBS brain injury waiver service providers.

77.39(1) Organizational standards (Outcome 1). Organizational outcome-based standards for HCBS BI providers are as follows:

- a. The organization demonstrates the provision and oversight of high-quality supports and services to consumers.
- b. The organization demonstrates a defined mission commensurate with consumers' needs, desires, and abilities.
- c. The organization establishes and maintains fiscal accountability.
- d. The organization has qualified staff commensurate with the needs of the consumers they serve. These staff demonstrate competency in performing duties and in all interactions with clients.
- e. The organization provides needed training and supports to its staff. This training includes at a minimum:
 - (1) Consumer rights.
 - (2) Confidentiality.
 - (3) Provision of consumer medication.
 - (4) Identification and reporting of child and dependent adult abuse.
 - (5) Individual consumer support needs.

HCBS General Questions:

Do HCBS rules have any restrictions on the age of an employee providing an SCL service? We are considering hiring 17-year-olds to provide SCL services.

There is this re: SCL:

441—77.37(249A) Home- and community-based services intellectual disability waiver service providers. Providers shall be eligible to participate in the Medicaid HCBS intellectual disability waiver program if they meet the requirements in this rule and the subrules applicable to the individual service. The standards in subrule 77.37(1) apply only to providers of supported employment, respite providers certified according to subparagraph 77.37(15)“a”(8), and providers of supported community living services that are not residential-based. The standards and certification processes in subrules 77.37(2) through 77.37(7) and 77.37(9) through 77.37(12) apply only to supported employment providers and non-residential-based supported community living providers. The requirements in subrule 77.37(13) apply to all providers. EXCEPTION: A person hired through the consumer choices option for independent support brokerage, self-directed personal care, individual-directed goods and services, or self-directed community support and employment is not required to enroll as a Medicaid provider and is not subject to the review requirements in subrule 77.37(13). Also, services must be rendered by a person who is at least 16 years old (except as otherwise provided in this rule) and is not the spouse of the consumer served or the parent or stepparent of a consumer aged 17 or under. People who are 16 or 17 years old must be employed and supervised by an enrolled HCBS provider unless they are employed to provide self-directed personal care services through the consumer choices option. A person hired for self-directed personal care

services need not be supervised by an enrolled HCBS provider. Consumer-directed attendant care and interim medical monitoring and treatment providers must be at least 18 years of age.

441—77.37(16) Supported Employment Providers

d. (1) Individual Supported Employment: bachelor's degree or commensurate experience (no specific age listed)

d. (2) Long-term Job Coaching: associate degree, or high school diploma or equivalent and 6 months' relevant experience. (no specific age listed)

441-77.25(9) Prevocational habilitation

c. (1) A person providing direct support without line-of-sight supervision shall be at least 18 years of age and possess a high school diploma or equivalent degree. A person providing direct support with line-of-sight supervision shall be 16 years of age or older.

How does a provider demonstrate or provide proof of policy review?

IME has said the following:

How Are You Keeping Track?

- Upon review, it is the provider's responsibility to adequately demonstrate its employees have received the required training.
- The law does not specifically state how training should be tracked or maintained, there is some discretion, however, it should be consistent between all staff and easily verifiable.

It is common for trainings to have individual signature acknowledgement. However, there is not a requirement that staff sign off on individual policies. IME will expect you to follow your own policies. During an HCBS review, specialists will want to see evidence staff were trained on your policies and procedures. This may be shown through individual sign-off sheets, orientation checklist or other means of tracking compliance.

Dependent Adult Abuse

The dependent adult and child abuse rules can be found in Iowa code 235B.16 and 232.69, and additional requirements in Chapter 77. The provider self-assessment can be used as a resource for this as it has the rule references in it for each requirement - some are vague - for example incident reporting says - Chapter 77.

Provider Self-Assessment

The provider self-assessment lists all HCBS training and policy requirements along with the rule references. HCBS 2019 Provider Quality Management Self-Assessment

Other Services

ICF-ID

441-82.2(3) Facility staffing

e. Staff training program.

(1) The facility shall provide each employee with initial and continuing training that enables the employee to perform the employee's duties effectively, efficiently, and competently.

(2) For employees who work with clients, training shall focus on skills and competencies directed toward clients' developmental, behavioral, and health needs.

(3) Staff shall be able to demonstrate the skills and techniques necessary to administer interventions to manage the inappropriate behavior of clients.

(4) Staff shall be able to demonstrate the skills and techniques necessary to implement the individual program plans for each client for whom they are responsible.

82.2(6) Health care services

c. Nursing services. The facility shall provide clients with nursing services in accordance with their needs. These services shall include:

(1) Participation as appropriate in the development, review, and update of an individual program plan as part of the interdisciplinary team process.

(2) The development, with a physician, of a medical care plan of treatment for a client when the physician has determined that an individual client requires such a plan.

(3) For those clients certified as not needing a medical care plan, a review of their health status which shall:

1. Be by a direct physical examination.

2. Be by a licensed nurse.

3. Be on a quarterly or more frequent basis depending on client need.

4. Be recorded in the client's record.

5. Result in any necessary action including referral to a physician to address client health problems.

(4) Other nursing care as prescribed by the physician or as identified by client needs.

(5) Implementing, with other members of the interdisciplinary team, appropriate protective and preventive health measures that include, but are not limited to:

1. Training clients and staff as needed in appropriate health and hygiene methods.

2. Control of communicable diseases and infections, including the instruction of other personnel in methods of infection control.

3. Training direct care staff in detecting signs and symptoms of illness or dysfunction, first aid for accidents or illness, and basic skills required to meet the health needs of the clients.

RCF

481-57.6(2) Residential care facility for persons with an intellectual disability (RCF/ID).

g. In-service educational programming. The in-service educational programming required by paragraph 57.10(2)“c” shall include educational programming specific to serving persons with an intellectual disability.

481-57.6(135C) Special classification

481-57.6(1) Memory care

e. Staff training. All staff working in a memory care unit or facility shall have training appropriate to the needs of the residents. (I, II, III)

(1) Upon assignment to the unit or facility, all staff working in the unit or facility shall be oriented to the needs of residents requiring memory care. Staff members shall have at least six hours of special training appropriate to their job descriptions within 30 days of assignment to the unit or facility. (I, II, III)

(2) Training shall include the following topics: (II, III)

1. An explanation of Alzheimer’s disease and related disorders, including symptoms, behavior and disease progression;
2. Skills for communicating with persons with dementia;
3. Skills for communicating with family and friends of persons with dementia;
4. An explanation of family issues such as role reversal, grief and loss, guilt, relinquishing the caregiving role, and family dynamics;
5. The importance of planned and spontaneous activities;
6. Skills in providing assistance with activities of daily living;
7. Skills in working with challenging residents;
8. Techniques for cueing, simplifying, and redirecting;
9. Staff support and stress reduction;
10. Medication management and nonpharmacological interventions.

(3) Nursing staff, certified medication aides, medication managers, social services personnel, housekeeping and activity personnel shall have a minimum of six hours of in-service training annually. This training shall be related to the needs of memory care residents. The six-hour initial training required in subparagraph 57.6(1)“e”(1) shall count toward the required annual in-service training. (II, III)

481-57.10(2) Duties of an administrator

The administrator shall:

- a. Select and direct competent personnel who provide services for the residential care program. (III)
- b. Arrange for the heads of nursing, social services, dietary and activities to attend a minimum of ten contact hours of educational programs per year to increase skills and knowledge needed for their positions. The ten hours is in addition to the in-service requirements in paragraph 57.10(2)“c.” (III)
- c. Provide in-service educational programming for all employees with direct resident contact and maintain records of programs and participants. (III) In-service educational

programming offered during each calendar year shall include, at minimum, the following topics: (I, II, III)

- (1) Infection control.
- (2) Emergency preparedness (fire, tornado, flood, 911, etc.).
- (3) Meal time procedures/dietary.
- (4) Resident activities.
- (5) Mental illness/behavior modification/crisis intervention.
- (6) Resident safety/supervision.
- (7) Resident rights.
- (8) Medication education, to include administration, storage and drug interactions.
- (9) Resident service plans/programming/goals.

481-57.19(135C) Drugs

57.19(3) Drug administration – authorized personnel

- a. A properly trained person shall be charged with the responsibility of administering medications as ordered by a primary care provider. (II, III)
- b. The person shall have knowledge of the purpose of the drugs and their dangers and contraindications. (II, III)
- c. The person shall be a licensed nurse or primary care provider or shall have successfully completed a department-approved medication aide course and passed a department-approved medication aide challenge examination administered by an area community college. (II, III)
- d. Prior to taking a department-approved medication aide course, the person shall have a letter of recommendation for admission to the medication aide course from the employing facility. (III)
- e. A person who is a nursing student or a graduate nurse may take the challenge examination in place of taking a medication aide course. The person shall do all of the following before taking the medication aide challenge examination:
 - (1) Complete a clinical or nursing theory course within six months before taking the challenge examination; (III)
 - (2) Successfully complete a nursing program pharmacology course within one year before taking the challenge examination; (III)
 - (3) Provide to the community college a written statement from the nursing program's pharmacology or clinical instructor indicating that the person is competent in medication administration. (III)
- f. A person who has written documentation of certification as a medication aide in another state may become a medication aide in Iowa by successfully completing a department-approved nurse aide competency examination and a medication aide challenge examination. The requirements of paragraph 57.19(3)"d" do not apply to this person. (III)
- g. In a freestanding residential care facility licensed for 15 or fewer beds, a person who has successfully completed a state-approved medication manager course may administer medications.

481-57.33(135C) Crisis Intervention

57.33(6) The facility shall provide to the staff a department-approved training program by qualified professionals on physical restraint techniques. (I, II)

Other Questions:

Cultural Competency Training - Is it a requirement? Where does one get this training?

Cultural competency is a common expectation though outside accreditation bodies (ex: CARF). There is no curriculum specified in Iowa Administrative Code, allowing latitude. DirectCourse and Relias have components for this.

Do RCF regulations layout requirements for Behavior management training?

Refer to 57.10(2) for Duties of an administrator.

What about Crisis Intervention in an RCF?

481—57.33(135C) Crisis intervention.

57.33(6) The facility shall provide to the staff a department-approved training program by qualified professionals on physical restraint techniques. (I, II)

- a. The facility shall keep a record of training for review by the department and shall include attendance. (II, III)
- b. Only staff with documented training in physical restraint and techniques shall be authorized to assist with physical restraint of a resident. (I, II)
- c. Under no circumstances shall a resident be allowed to actively or passively assist in the restraint of another resident. (I, II)