

## Adult Foster Home (AFH) Training Approval Request & Web Posting Form

Requests may take up to 1 month for the Training Approval Committee (TAC) to review. Please allow adequate time prior to your training event to submit the request. You will be contacted if the committee is unable to process your request as submitted.

**Request date:** \_\_\_\_\_

### Section 1

**Intended adult foster home audience** (*check all that may apply*):

- Addictions and Mental Health     Aging and People with Disabilities  
 Developmental Disabilities

Indicate if training is for:     Business hours     Specialized contract

**Title of training or conference:** \_\_\_\_\_ **Credit hours requested:** \_\_\_\_\_

**Training date(s):** \_\_\_\_\_ **Location:** \_\_\_\_\_ **Start time:** \_\_\_\_\_ **End time:** \_\_\_\_\_

**Submitted by:** \_\_\_\_\_ **Agency and Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Are there limits on participation?     Yes     No

**Describe limits:** \_\_\_\_\_

**DELEGATED AGENCY APPROVAL:** Is this a post-to-web only submission?

### Section 2

**Name and contact information of presenter/instructor/training sponsor:**

**Sponsoring organization:** \_\_\_\_\_ **Name of contact:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Name of trainer:** \_\_\_\_\_

**Trainer email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

List instructor's qualifications related to training (*certification, resume or other credentials*):

**Training format:**     Web     Self-study     Classroom     Conference     Other:

### Section 3

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**Describe training as it applies to AFH settings**, including course objectives and training outcomes. *Training hours will not be granted if objectives do not show a direct relationship to care for individuals in an AFH.*

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**Provide the required information with the request. You may be asked for more information, if what is provided is not adequate to make a decision.**

- **Course or conference learning objectives *(Required)***
- **Course or conference agenda or outline *(Required)***
- **Course curriculum *(Required)***

Mark the boxes indicating what is included with this submission:

Course evaluation    Registration information    Copy of advertisement or brochure

# Instructions for Completing ODHS 1510

The Adult Foster Home (AFH) Training Credit Request and Web Posting Form is to be used for new training approvals and for web posting of trainings created by delegated trainers.

**Prior to submitting any requests**, check the [AFH Approved Training website](#), as the course may already be approved. If the course is already approved, **do not** send in a request for the sole purpose of receiving a certificate or verification of course approval for licensure. The TAC **WILL NOT** provide certificates of attendance or participation.

## **If submitting training for posting to website only:**

- Check that all criteria (*listed below*) for agencies with delegated approval authority are met for the organization and training event prior to submitting training for posting to the web.
- Only trainings that meet the intended training requirements of the AFH Providers will be posted to the web.

### **Criteria for agencies with delegated approval authority**

(1) Courses provided or sponsored by staff from the following organizations will not require approval from the AFH TAC when the training meets requirements under applicable OARs and is being presented to the provider types for which the delegated organization has oversight. Only the AFH TAC may extend the approval to AFH provider types not within the delegated organization's authority.

- Oregon Long-Term Care Ombudsman (LTCO)
- Oregon Care Partners (OCP)
- Safety Oversight and Quality Unit (SOQ)
- Office of Training, Investigations and Safety (OTIS)
- AFH Licensors with authority over OHA or ODHS AFH
- ODHS, AAA or AMH staff with management approval
- County Mental Health Residential Specialists
- Oregon Home Care Commission (OHCC)
- Oregon Training and Consultation (OTAC)
- Community Developmental Disabilities Programs (CDDP)

(2) The specific courses, offered by the organizations listed below will not require approval from the AFH TAC.

- Fire and Life Safety Courses offered by the Oregon State Fire Marshal, Federal Emergency Management Agency (FEMA) staff, American Red Cross or local Fire and Rescue authorities;
- For Addictions and Mental Health Division (AMH) and Developmental Disability (DD) AFH providers only, First Aid and CPR courses provided by or endorsed by

the American Heart Association, the American Red Cross, American Safety and Health Institute, including MEDIC First Aid.

- Oregon Intervention System (OIS) Training for DD Adult Foster Homes only;
- Bloodborne Pathogen training provided by Occupational Safety and Hazard Administration (OSHA).

### **Submitting trainings to be approved by the committee**

Please fill out **ALL** sections of the form completely and include any required materials. An approved course is valid for 12 months from the date of approval, unless otherwise noted. Any requests received without required materials will not be processed.

#### **Section 1**

- **Intended audience** — Indicate which AFH provider type(s) you are submitting for. The AFH TAC may extend the approval to AFH provider types not indicated on the request form if the training content is found to be applicable.
- **Training information** — Make sure this information is complete. In order to properly post the training to the website, it is critical that we have the following information:
  - ✓ Title of training
  - ✓ Training hours requested in half hour increments (**Note:** *Training hours cannot be allowed for meal periods, vendor fairs, keynote speakers or product demonstrations.*)
  - ✓ Date(s) and time(s) of training, if known when submitting request
  - ✓ Cost of training
  - ✓ Location of the training — List the website or physical location
  - ✓ Submitted by — This should be the name of the individual who can be contacted with questions related to the approval. Please include title, agency, phone number and email address.
- **Limits on participation** — Indicate if there are limitations to attendance. (*For example: "Staff of Homer's AFH only" or "Limited to 30 attendees."*)
- **Post-to web only submission** — Indicate if this course meets the '**Delegated Approval Criteria**' from above and is simply a submission to post to the website.

#### **Section 2**

- **Name and contact information of presenter, trainer or sponsor** — This section must be completed and include details about any sponsors and the trainer(s).
- **Training format** — Indicate the format of the training presentation. If "other" is selected, please describe the format.
- **Other training formats** — Books, journals, websites, articles, self-study training, videos, films and electronic media will be reviewed by the AFH TAC **only** if those materials are part of a formal training event, in which learning objectives are established and measured.

### **Section 3**

- **Description and applicability** — Requests must clearly describe the course content and must demonstrate the applicability to skills needed to provide support in the AFH. Approval of training hours will not be granted for offerings that have no direct relationship to skill development for the provision of care in the AFH setting or applicable business support. Be sure to submit any training materials you have such as PowerPoint slides, handouts and copies of the test participants must take to receive a certificate.

✓ **Types of requests that will be declined may include:**

- Personal tax preparation time or personal financial planning
- Courses geared for medical professionals
- Self-help or self-awareness courses
- Product demonstrations
- Subscriptions, circulars, DVDs, literature without clear educational components and training objectives that are evaluated
- Individual Service Planning (ISP) and RN delegation

✓ **Types of requests that may be approved include:**

- Training specific to a disability or diagnosis that is not medical in nature, requiring specific care (*Alzheimer's, diabetes, autism, depression, etc.*)
- Documentation and recordkeeping for AFH
- Mandatory Abuse and Protective Services
- Nutrition and meal planning
- Infection Control

**Required information** — Submit all required materials along ***with any supplemental information*** and check each box as it applies to any supplemental materials you are sending (*course outline, handouts, registration form*)

**Required information includes:**

- **Course curriculum** may include a detailed description of the presentation, copies of slides and/or handouts that are provided as part of the training.
- **Learning objectives** must be described clearly.
- **Course agenda** with anticipated timelines is required.

You can get this document in other languages, large print, braille or a format you prefer. Contact APD adult foster home policy at (503) 373-2227 or email [apd.afhteam@odhs.oregon.gov](mailto:apd.afhteam@odhs.oregon.gov). We accept all relay calls or you can dial 711.