

ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES UNDERSTANDING DEVELOPMENTAL DISABILITIES TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. At what age does intellectual developmental disability appear?
- 2. Name the 4 degrees of severity.
- 3. Why would intellectual developmental disabilities be diagnosed after the age of 18?
- 4. What are 3 cause of IDD?

I, ______ (print your name) have read this module on

______ (date) and fully understand the document. I will receive one credit hour for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES PROGRAM IMPLEMENTATION / ACTIVE TREATMENT TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. The core of Active Treatment is that every person has the capacity to do what?
- 2. Development is lifelong. True or False
- 3. What is **your** goal for the individual?
- 4. Who is Active Treatment based on?

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive one half hour credit for

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Your Signature	Date
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Return Completed Form to:

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ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES GUIDELINES FOR WORKING WITH PEOPLE WITH VISUAL DEFICITS AND MOBILITY CONCERNS TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. How far behind you should the individual be when you're guiding them?
- 2. What's the first thing you do when approaching a blind individual?
- 3. When walking up or down stairs, you should take only 1 step at a time. True/False
- 4. The most important part of your job is to do what?

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ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES DIGNITY AND SENSITIVITY TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. What words should you use when making requests of the residents?
- 2. When bathing, changing or toileting, what do you want to make sure of?
- 3. How are you **NOT** to interact with the individuals?
- 4. Should you focus on similarities/strengths or differences/weaknesses?

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______(date) and fully understand the document. I will receive one half hour credit for

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Your Signature	Date
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ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES PERSONAL CARE TRAINING TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. In order for the individuals to look & feel their best at all times, staff must pay attention to what?
- 2. When brushing & flossing and individuals teeth, you must make sure you do what first?
- 3. While changing a resident's brief, do you lift the legs or roll from side to side?
- 4. Before bathing and individual, where do you check the water temperature from?

I, ______ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive one credit hour for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES RIGHTS, CHOICES & SELF DETERMINATION / OFFERING & ENCOURAGING CHOICE MAKING TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. The most vital part of your job is to do what?
- 2. How does the individual communicate their choice?
- 3. Name 3 choice making opportunities.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive one credit hour for

reading this training module.

Date
Phone#

Return Completed Form to:

Questions Call:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES HIPPA \ PROTECTING PERSONAL HEALTH INFORMATION TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive a half hour credit for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:





ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES INCIDENT MANAGEMENT TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, ______ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive one credit hour for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:





ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES MISTREATMENT AND ABUSE TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, ______ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive two credit hours for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES LIFTING TECHNIQUES / BASICS OF BODY MECHANICS TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

- 1. A minimum of how many people are required of all lifts at AVS/NHS?
- 2. When lifting a client, what are two examples of poor body mechanics?
- 3. When lifting a client, what are two examples of good body mechanics?

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reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES PREVENTING DISCRIMINATION, DISCRIMINATORY HARASSMENT AND RETALIATION TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

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Your Signature	Date
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Return Completed Form to:

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ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES POSITIVE APPROACHES AND HEALTHY RELATIONSHIPS TRAINING MODULE TEST

<u>Instructions:</u> Answer the following questions, complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

Please circle the best answer to the following questions.

- **1.** The goal of this training is for everyone to learn techniques for improving:
 - a) Driving skills
 - b) Personal and professional relationships
 - c) Test scores
 - d) Take down techniques
- **2.** The topic covered is Building Healthy Relationships, in any relationship it is Important to treat everyone with:
 - a) Dignity
 - b) Frustration
 - c) Respect
 - d) a & c

3. In the field of (IDD) Intellectual and Developmental Disabilities, we should remember in our working

- relationships with people we support that they deserve to be seen as:
- a) someone who does not have an opinion
- b) an adult regardless of their IQ
- c) someone always needing assistance
- d) someone for whom I need to always make decisions
- 4. As staff, we are role models for the people we support.
 - a) True
 - b) False
- 5. Not having human touch may be the cause of some challenging behavior.
 - a) True
 - b) False
- 6. We must learn to not take a person's behavior personally when supporting people with an IDD.
 - a) True
 - b) False
- 7. Which of the following are good tips for interacting with people with disabilities
 - a) Be polite
 - b) Offer assistance to the person, but wait until your offer is accepted before you help
 - c) Do not take the individual's behavior(s) personally
 - d) All of the above

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Please circle the best answer to the following questions.

- 8. If a person has a speech impairment we should take the time to listen, rather than pretend we understand.
 - a) True
 - b) False
- 9. Active listening is important in the communication process.
 - a) True
 - b) False
- **10.** Barriers to effective communication may include:
 - a) Failure to understand the message
 - b) Word selection
 - c) Different perceptions
 - d) All of the above

____ (date) and fully understand the document. I will receive four credit hours for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

Questions Call:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 877-384-1729 (ask for Training Services Coordinator)

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ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES KEYS TO SAFE DOCUMENTATION TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive a half hour credit for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES OSHA / BLOODBORNE PATHOGENS / STANDARD PRECAUTIONS TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive a half hour credit for

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Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES FIRE SAFETY EMERGENCY ACTION PLANS TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive one credit hour for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES DISASTER PLAN AND EMERGENCY PREPAREDNESS TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, ______ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive a half hour credit for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES HEALTHCARE SLIP AND FALL PREVENTION TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive a half hour credit for

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Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES NORMALIZATION/SOCIAL VALORIZATION TRAINING MODULE SELF CERTIFICATION

<u>Instructions:</u> Complete the certification statement, sign and fill in your contract information. Return the completed form using information below.

I, _____ (print your name) have read this module on

_____ (date) and fully understand the document. I will receive a half hour credit for

reading this training module.

Your Signature	Date
Email	Phone#

Return Completed Form to:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672 Questions Call:



ALLEGHENY VALLEY SCHOOL / NORTHWESTERN HUMAN SERVICES TRANSPORTING PASSENGERS WITH SPECIAL NEEDS TRAINING MODULE TEST

Instructions:	Answer the following questions, complete the certification statement, sign and fill in			
	your contract information. Return the completed form using information below.			

- 1. Which three areas of the vehicle should you inspect every time before you transport individuals?
- 2. What are the first three things you do if you breakdown while transporting individuals?
- 3. You should ride the lift with an individual for safety reasons? True or False
- 4. Should **<u>both</u>** the wheelchair brakes be set during the loading/unloading process?
- 5. It is okay to transport individuals using only some of the restraints as long as you are going less than a mile? True or False

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Your Signature	Date
Email	Phone#

Return Completed Form to:

Questions Call:

rdailey@kfamilysolutions.org Or Fax: 610-527-8672



		EFFECTIVE C	OMMUNICATION \	TRAINING MODUL	E TEST	
<u>In</u>	structions:	Answer the following que Return the completed for			nt, sign and fill in	your contract information.
1. What a	are the three bas	c, simple skills for good comm	unication? A)	B)		C)
	r <u>False</u> (please c nunication (how f	ircle) In conversations with oth hey act).	ers, verbal communic	ation (what they say) is more significa	ant than nonverbal
3. When	we LISTEN, how	can we show an approachat	le attitude? List five	ways we can do th	is:	
	A)	В)		C)		
	D)	E)				
		ive communicators, when we		ecognize the impor	tance of learning	g to
5. Three		d AVOID when we are comm		nildren: B)		
	C)					
their nee 7. In refe	ds and abilities. rence to helping	cle) Some children and young to build the self-esteem of a ch esteem. How can you do this?				
		is the term used to reis the term used				erstood.
l,						(date) and fully
understai	na the document	. I will receive two credit hour	for reading this traini	ng moaule.		
	Your Signature		Date		rdailey@k	ompleted Form to: familysolutions.org 610-527-8672
	Email		Phone#		87	estions Call: 7-384-1729 J Services Coordinator)