

Supported Employment Training Checklist

This form is a tool to help Office of Developmental Disabilities Services (ODDS) provider agencies to determine if trainings, webinars and/or breakout sessions can count as a supported employment topic as specified in the Employment Professional Qualifications and Training Worker Guide that details the training requirements for employment professionals.

If after careful review by the manager or supervisor of the provider agency, it is determined the training meets at least one of the core competencies listed in this form, then it will qualify as a supported employment topic and can count as a continuing education credit (CEC). The training must also be determined to be at least 60 minutes.

Once the form is completed by a supervisor or manager, it should be kept with the training's record for each staff member who had completed the training.

This form is designed for provider agencies with an employment endorsement and independent contractors that provide ODDS services.

This checklist is not applicable to Personal Support Worker (PSW) Job Coaches. To verify if a training will count as a supported employment topic, PSWs should contact employmenttraining.review@odhsoha.oregon.gov.

Important: The ODDS Training Catalog has a list of free on-demand trainings. All on-demand trainings in the catalog are approved for CECs and will count towards supported employment topics.

Please note that the core competencies listed below are not in themselves trainings or transcript of trainings. This tool is a checklist to help providers determine if a training will cover at least one core competency topic.

Training was Reviewed	Meets the Following Competencies (please initial)

Employment Core Competency Training and Essential Elements	Date when Training was Reviewed	The Training Meets the Following Competencies (please initial)
5 - Job Coaching: Task Design and		
Training		
Task design and accommodations (e.g. job		
aids, assistive and information technology),		
task analysis, systematic instruction, fading.		
6 - Job Coaching: Support		
Strategies		
Behavioral supports at work, structure and		
visual supports.		
7 - Job Coaching: Natural Supports		
Identifying and developing natural supports,		
teaching coworkers to train and support		
individuals, ongoing relationships with employers (e.g. communications,		
negotiating job enhancements).		
8 - Managing Benefits		
Benefits planning, Social Security Work		
Incentives (e.g. impairment related work		
expenses, subsidies), medical benefits (e.g.,		
Employed Persons with Disabilities		
Program, Medicaid).		
9 - Systems, Partners and		
Resources for Employment		
Vocational Rehabilitation Service,		
partnerships with families and schools,		
intellectual/developmental disability services		
and waiver programs, braided funding,		
system navigation, Work Source and One-		
Stops.		

Employment Core Competency Training and Essential Elements	Date when Training was Reviewed	The Training Meets the Following Competencies (please initial)
10 - Transition from School to Work		
Work experience, navigating systems		
(vocational rehabilitation services,		
developmental disability services and		
schools), and best practices in transition.		
11 - Organizational Change		
Wide range of topics (e.g. planning to move		
from facility-based services to community		
employment, supporting staff in dispersed		
community locations, enlisting board		
support, board training, managing dual		
programs, organizational systems (Customer retention management and		
outcome data), evolving roles and		
responsibilities.		
12 - Self-employment		•
Micro-boards, micro-enterprises, funding		
and other resources for building and		
marketing a business.		

I, , certify that I have carefully considered the core competencies as they relate to the training noted below and have determined it meets at least one of the core competencies requirements and is at least 60 minutes in length. I will attach this document to the corresponding training record(s) for myself and/or my organization's staff.

Name of Training:	
Supervisor Signature:	
	Date: