

**2018 Port Angeles**

**Developmental Disability Specialty Training**

***3 Day Training: 9:00 am – 4:00 pm***

***201 West 1st St., Ste. 2, Port Angeles, WA 98362***

See map: [Google Maps](http://maps.google.com/?q=201+West+1st+St.%2C+Port+Angeles%2C+WA%2C+98362%2C+us), [Yahoo! Maps](http://maps.yahoo.com/maps_result?addr=201+West+1st+St.&csz=Port+Angeles%2C+WA&country=us), [MapQuest](http://www.mapquest.com/maps/map.adp?searchtype=address&country=US&address=201+West+1st+St.&city=Port+Angeles&state=WA&zipcode=98362)

DD Specialty Training is a **FREE** three-day introductory training intended for individuals who support people with developmental disabilities. Specialty Training hours can be used for a possible 18 CE approved hours see WAC 388-112-0225. You must attend all three days and pass a written test to receive your specialty designation and certificate. Successful completion of this class fulfils the WAC requirement for AFH, Assisted Living homes and Alternative Living providers. This is not an approved CE for Individual Care Providers.

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| **Training content will include:** | **Training dates:** |
| * Overview of Developmental Disabilities * Value of Service Deliveries * Effective Communication * Introduction to Interactive Planning * Understanding Behavior * Crisis Intervention and Prevention * Overview of Legal Issues and Individual’s Rights | * April 10 – 11, 2018 * Oct 10 – 11, 2018 |

Classes are held in three seven hour sessions, usually 9:00 a.m. to 4 p.m., with an hour break for lunch. Promptness is required or you may be asked to register for another training session.

**Lunch is not provided at the training**. You are welcome to bring your lunch or venture out into the community to visit nearby restaurants. No refrigerator available.

Attendees are given a paper loose leaf manual. **Attendees should bring an empty 2-inch loose-leaf binder or a notebook, a highlighter, ink pen and photo ID to class.**

*The meeting site is handicapped accessible and additional assistance or accommodation is available upon request. Requests must be received at least 2 weeks before the first day of class. If accommodation or assistance is not requested 2 weeks before the day of training they may not be available and the student may need to sign up for another training session.*

For an internet listing of all DDD Specialty Trainings offered in the state go to <https://www.dshs.wa.gov/dda/dda-specialty-training>

**To register email or fax attached registration:**

Email Teresa Wray at [teresa.wray@dshs.wa.gov](mailto:teresa.wray@dshs.wa.gov) or fax at 360-417-1497

*Space is limited based on location. It is recommended to sign up for a class at least 3 weeks in advance. Any late arrivals will need to reschedule.*



Check one:

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|  | **April 10 – 11, 2018** | Trainer - Donna Dykstra |
|  | **October 10 – 11, 2018** | Trainer - Teri Johnson |

Participants Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City & Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone in case of short notice changes to training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Check Why taking the training:   * Licensed AFH Provider, Name of your AFH: * AFH Resident Manager, AFH you work for: * AFH Caregiver, AFH you work for: * Assisted Living Administrator * Assisted Living Caregiver * Companion Home Provider * Alternative Living Provider * DDA Residential Program Employee * DDA Employment Program Employee * Other, Please describe: | Please fill out, if you can, the below information:  Name of Company/Employer:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address of Company/Employer:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Please register early as space is limited and the training sessions fill quickly. Please tell us at least two weeks in advance if you need special accommodations** or write it below. I need this special accommodation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Send this registration form via mail, email or fax to:**

Teresa Wray DSHS, DDA

201 W 1st Street, STE.2, Port Angeles, WA 98362

Fax (360) 417-1497

Email- [teresa.wray@dshs.wa.gov](mailto:teresa.wray@dshs.wa.gov)

(For questions, not to register, you can call Teresa Wray, DDA, at 360-565-2701)

DDA Region 3 – Port Angeles

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Registration Form