

GROUP HOME 40-Hour INITIAL ADMINISTRATOR CERTIFICATION TRAINING

**Class Size is Limited to Seven (7) participants.
Please Register As Soon As Possible To Insure Your Place**

**Class hours are 9:00 a.m. to 5:00 p.m. daily for a total of 5 days
split into 2 consecutive weeks [Wed-Fri and Thur-Fri]**

Presented by the Bay Area Alliance for Youth and Family Services, Inc.

This course is approved by the California Department of Social Services Administrator Certification Program.

The approved vendor number for this course is 1000583-730-1.

Course Description:

This 40-hour course meets the requirements outlined in the Group Home 40-Hour Initial Certification Core of Knowledge Guidelines. Presenters will discuss CCL Regulations, applicable laws, general business operations and management, supervision and training of staff members. This training will also include valuable information regarding caring for clients in a group home. Specifically, discussion will focus on meeting the clients' unique psychosocial, educational, physical and medical needs. General development of a program statement (LIC 9106), behavior structure-supervision, needs and service plans and modification systems and emergency interventions will also be discussed and reviewed.

Course Objectives:

By the end of the course, participants will understand and apply:

- General knowledge of CCL Regulations
- Administrator Responsibilities and Duties
- The Physical Plant
- Policies and Procedures related to the LIC 9106 Program Statement
- Emergency Interventions and Runaway Procedures
- Reporting Requirements
- Client, Staff, and Administrative Record Requirements
- Medication procedures
- Development and implementation of a Training Program for Group Home staff
- General knowledge of applicable laws to operating a Group Home
- General business operations of a Group Home
- Client's Needs and Service Plan
- Examples of documents, policies, and procedures required by CCL

Teaching Methods:

The methods the presenters will use to train the curriculum include lecture, discussion, practical field experience, and question/answer testing. Throughout the course participants will have the opportunity to ask questions. A review test will be given intermittently and a final test will be given on the last day of the course (Day Five). Because the information is necessary to know for the administrator examination, daily handouts of all information presented will be available.

Please note – this class CANNOT be used for:

- ❖ RENEWAL of an Administrator certificate unless it has been more than 4 years since the expiration date.
- ❖ Obtaining an Adult Residential Facility administrator certificate.

Baayfs, Inc.

Bay Area Alliance for Youth and Family Services, Inc., 1820 Galindo St. #215, Concord, CA 94520
Phone: (925) 609-6990 FAX: (925) 969-8337 Email: baayfs@yahoo.com

IMPORTANT Please Read -- Registration Agreement:

The training course fee is **\$325**. Space is reserved on a first come first serve basis. Registration is confirmed with a **non-refundable deposit of \$150** either by check or credit card (VISA, MASTERCARD, DISCOVER, AMERICAN EXPRESS). Final balance, if any, is due the first day of class. In the event of cancellation due to an unanticipated situation whereby you are not able to attend after paying the deposit, you may re-schedule your training to another date and have your deposit re-applied; otherwise deposits are not refundable as resource materials are purchased in advance of your course date. It is understood that by registering for this training you commit to attending and completing all the sessions and course assignments. By signing below or having my name registered for me on my behalf by my agency, I am accepting and acknowledging the terms of the registration agreement.

Your Signature **Print Your Name** **Date**

2012 Training Dates (check the training dates you are registering for):

- JAN 4-6,12,13 FEB 8-10,16,17 MAR 7-9,15,16 APR 11-13,19,20 JUNE 6-8,14,15
- JULY 11-13,19,20 AUG 1-3,9,10 SEPT 5-7,13,14 OCT 3-5,11,12
- NOV 7-9,15,16 DEC 5-7,13,14

Training Title: 40 Hour Initial Administrator Certification Training

Training Site Location: **1820 Galindo St. #215 in Concord, CA**

Your Agency Information, *if applicable*:

Agency Name _____

Agency Contact Person _____ Telephone _____

PARTICIPANT's Name _____

Address _____ City _____ Zip _____

Telephone _____ FAX _____ Email _____

THE FOLLOWING IS REQUIRED MATERIAL used in class:

- I need a copy of the CCL regulations: General Licensing Requirements, Title 22, Div. 6, chapter 1 and Group Homes, Title 22, Div. 6, chapter 5 [**additional \$35 material fee**]
- I will download these regulations myself from Calif. Dept of Social Services

Enclosed is a check payable to BAAYFS for \$150.00 325.00 \$360 [includes CCL regs]

Please charge \$ _____ to my credit card:

- Visa Mastercard Discover American Express

Account Number _____

Expiration Date _____ Zip Code _____

Authorizing Signature _____

You may MAIL, FAX or EMAIL this Registration [see top of page]