

CMH for Central Michigan

## **ABA Treatment Plan Training Record**

### **Instructions**

The purpose of the ABA Treatment Plan Training Record is to document training on the ABA Treatment Plan.

Fields to complete:

- Consumer Name
- Date of Birth (DOB)
- Case Number
- Agency
- Effective Date of ABA Treatment Plan
- Trainer's Name and Credentials (Person Conducting Training)
- Date of Training on ABA Treatment Plan

Each provider of service should print their name in the "Name of Staff Attending" section to document the receipt of training on the ABA Treatment Plan.

The CMHCM Behavior Analyst overseeing the ABA Treatment Plan reviews to make sure all technicians have received training, and signs and dates the form.

The form is emailed to the Autism Supervisor and is scanned into the Autism folder in the consumer's file in CIGMMO.