

MFIP, DWP, and SNAP Employment Counselor Training Courses and Self-Assessment

WFS Mission Statement:

To maximize participant economic self-sufficiency and family stabilization by:

1. Encouraging and empowering all families to secure employment;
2. Guiding families to increase their income and move out of poverty;
3. Preventing long-term dependence on public assistance as a primary source of family income.

WFS Vision Statement:

To provide residents on public assistance opportunities for improved employment and family stabilization.

An overview of this Training and Assessment Packet:

The following outline/training guide for new employment counselors is based on existing training plans at vendor agencies. It is expected that the training for new staff be completed within 90 days. At the end of that period, or sooner if determined by the Supervisor, the new employee will complete the self-assessment column. These results, and discussion with Supervisor, will determine whether counselor needs additional training.

Counselor, at the end of 90 days, please rate your comfort level on each topic under the head *Self-Assessment*.

The self-assessment scale is as follows: 1 = I am comfortable, 2 = Still have questions, 3 = Not familiar

On-line Ramsey County WFS New Counselor Training Content				
Online WFS Training Topics (best viewed on a PC)	Date	Time	Location	Counselor Initials
1. 90 Day Orientation				
2. Fit of Ramsey County and WFS Vision				
3. Change in Mindset				
4. The 4 Es				
5. Guided Self-Determination				
6. Dreams and Participant Directed Goal Setting				
7. Credentials and Certificates				
8. Coaching, Counseling, MI				
9. Self-Support Index				
10. Report Card Measures and Indicators				
11. Case Management				
12. Other Ops Definitions on Provider Webpage				
13. Sanction				
14. Home Visits				

Agency Provided Overview of MFIP Employment Services for Employment Counselors

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
15. Overview of Federal				
16. Overview of State				
17. Overview of County				
18. RC Provider Page				
19. Mission/Vision (County and Agency)				
20. Partners (MFIP network and Specialist projects)				
21. Roles of child care workers, financial workers, and counselors				
22. Financial literacy training (counselor)				

Motivational Interview and Coaching Circles

Training Date: _____ Training Time: _____ Trainer Name: _____

Attend Overview session: Date: _____ Time: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
23. Motivational Interviewing (this is an overview of MI's importance in employment services. This is not MI skills development training)				
24. Coaching for Success (6.3.15) Module Provider Webpage				
25. Coaching Circle Lesson #1 – Reflect and Plan				
26. Coaching Circle Lesson #2 – Action Plans				
27. Coaching Circle Lesson #3 – Powerful Questions				
28. Coaching Circle Lesson #4 – Goal Setting				
29. Coaching Tip #1 – Stress Management				

30. Coaching Tip #2 - Feedback				
31. Coaching Tip #5 - Scaffolding				
32. Coaching Tip #6 – Correspondence Training				
33. Coaching Tip #7 – Self-Awareness				

MFIP Program Entry for Participants

Training Date: _____ Training Time: _____ Trainer Name: _____

Attend Overview session: Date: _____ Time: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
35) Client choice/Cultural Specific Agencies				
36) MFIP Overview				
37) Case Movement – New referral, transfer process, exiting case process				

Assessment

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
38) My Bridge of Strength and Goal Action Plan and video				
39) Employability Measure				
40) MFIP Self Screen				
41) Brief Screening Tool and For Special Learning Needs				
42) Observational Checklist				
43) Career Assessments (ex. Iseek, Onet, etc.)				
44) Other Assessments (agency specific)				

Counselor Core Competencies

Employment Plan (EP) Planning

Training Date: _____ *Training Time:* _____ *Trainer Name:* _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
45) Regular EP				
46) Reduced hours/good cause EP				
47) FSS EP				
48) Coding (matching EP, EMPS code)				
49) Purpose of employment plan (coaching and MI, counseling, RC vision)				
50) Use of labor market information in goal-setting and EP development				
51) SMART Goal setting				
52) Activities and documentation requirements of each:				
a) Employment (subsidized and unsubsidized)				
b) Self-employment				
c) Job Search				
d) Unpaid Work Activities-FLSA guidelines				
e) Short-term education and training				
f) Post-secondary education				
g) GED / ABE / ESL				
h) Health/Social Services				
i) Assessment				
j) Other activities				
53) Alignment: assessment (MBS) → EP → activities → child care transmittal → case note				

Case Notes

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
54) Case note expectations for client meetings and interactions				
55) Things to omit from case notes (opinion, FV info, CPS reports, etc)				
56) Timeline for entering case notes/close case notes				
57) Case notes of correspondence				

Accountability

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
58) Support, engagement, incentives, MI, outreach, follow-up				
59) Sanction Process				
a) Good cause/case file review				
b) Notice of Intent to Sanction form (NOITS)				
c) Sanction protocol				
d) MFIP Sanctions, grant reductions, sanction limits				
e) Status Update Form - imposing sanctions				
f) Process for curing sanctions- staff and client expectations				
g) Contact attempts with sanctioned clients				
h) "Good cause" and retro-active issuance of benefits				
i) Conciliation and appeal processes/Fraud				
j) FSS sanction checklist				

k) Post 60 month sanctions				

Closing and Transferring MFIP Cases
Training Date: _____ *Training Time:* _____ *Trainer Name:* _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
60) Closed vs. suspended				
61) Verifying in casenotes in WF1				
62) Add termination codes on WF1 and close case				
63) Terminate child care and support services				
64) 90 day employed clients				
65) Review when transfer is appropriate				
66) MFIP transfer procedures				
67) Provider MFIP ES closure notice				

Family Stabilization Services
Training Date: _____ *Training Time:* _____ *Trainer Name:* _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
68) Hard to Employ Unemployable IQ<80 Learning Disabled Mental Retardation Mental Illness				
69) Ill or Incapacitated Participant Ill >30 days P Needed in Home Family Violence				
70) Ill/Incap – Special Medical PCA Services Waivered Services SED Child SPMI Adult/Child				
71) Employed 1 parent 25+ hours/week 1 parent reduced hours				

2 parent 55+ hours/week				
72) Immigrants in the County Less than 12 Months				
73) Age 60 or Older				
74) Recertifying and ending eligibility				
75) Special considerations and Employment Plan expectations				
76) Assessments: vocational, psychological, diagnostic				
77) What is a "qualified professional"				
78) Medical Opinion form				
79) Severe Emotional Disturbance form				
80) FSS Eligibility checklist/timelines				
81) Disability accommodations				
82) Communication between ES and FAS (status update)				

Extension Services/48-60 Month Transition

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
83) 48-month				
84) Extension Eligibility Review				
85) Extension Review Form and transfer process to extension				
86) Transfer to 48 month counselor process				
87) Working extension requirements and monitoring				
88) FVW extensions				

Family Safety

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
89) DV Specialist Role and counselor role				

90) Assessing Safety				
91) Documentation				
92) Family violence waiver: add/removal process and communication with FAS (status update)				
93) Resources (Bridges to Safety, Saint Paul & Ramsey County Domestic Abuse Intervention Project)				

Resources/Referrals

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
94) Ramsey County Specific				
95) Agency Specific				
96) Clothing (interview)				
97) Housing (shelters, public housing, section 8, section 42)				
98) Mental Health (diagnostic testing and ongoing services such as therapy, ARMHS, etc.)				
99) Children’s Services (therapy, CM for SED child, etc.)				
100) Chemical Dependency (rule 25)				
101) Furniture (Bridging)				
102) Food (food shelves, reduced programs, food trucks, etc.)				
103) Culturally Specific Services				
104) Ex-offender resources				
105) Legal Services (SMRLS)				
106) Training and Education				

Support Services

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
107) RC Support Services Policy				
108) Agency Support Services Policy				

Child Care Assistance

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
109) Application paperwork (MFIP and child care provider)				
110) Types of child care available				
111) Documentation needed prior to approval				
112) EP and transmittal				
113) How to set up childcare for 2-parent households				
114) Redetermination process				
115) Overpayments				
116) Think Small (formerly Resources for Child Caring) or other resources to help find a provider				
117) Termination of child care				

File Auditing and Set-Up

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
118) File Management Policy (WFS and Agency Specific)				

119)	New Participant Process Flow				
120)	Types of monitoring: DHS WFS Annually Monthly MBS				

Ramsey County Measures

Training Date: _____ Training Time: _____ Trainer Name: _____

Training Topics	Trainer Initials	Counselor Initials	Self-Assessment	Notes:
121) Performance Measures (Reports) (Review all measures)				
122) Tracking Hours in WF1				

Department of Human Services Training

DHS website for schedule details:

http://www.dhs.state.mn.us/main/groups/agencywide/documents/pub/dhs16_157826.pdf

Training Topics	Date	Time	Location	Counselor Initials
Employability Measures A				
Employability Measures B				
Family Stabilization Services				
Case Notes				
HIPAA				
Mandated Reporting				
ES MFIP 3-day Training				
Motivational Interviewing				
Sanction Training				
Workforce One Training				
Child Care				
MAXIS (if needed)				
Self-Support Index Video				