

Required Trainings and Screenings

STAFF

| | Owner* | Manager* | Driver | EMT Driver | Employee Attendant* | Dispatch* | Office Staff/Other* |
|---|--------|----------|--------|------------|---------------------|-----------|---------------------|
| Valid, state-issue ID | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Exclusion Checks 3 Databases: OIG, SAM, OFAC | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Valid Driver License** | | | ✓ | ✓ | ✓ | | |
| MVR (annually) | | | ✓ | ✓ | | | |
| Drug Screen (every 3 years) | | | ✓ | ✓ | ✓ | | |
| Criminal Background Check (every 3 years) | | | ✓ | ✓*** | ✓ | | |
| Defensive Training (every 3 years) | | | ✓ | ✓*** | | | |
| Passenger Assistance and Securement (every 3 years) | | | ✓ | ✓*** | ✓ | | |
| First Aid & CPR (kept current) | | | ✓ | ✓*** | ✓ | | |
| Blood Borne Pathogen | | | ✓ | ✓*** | ✓ | | |
| Code of Business Conduct (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| General Compliance Training (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| HIPAA (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| FWA Training (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Cultural Competency (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Abuse, Neglect and Reporting Trainings (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Critical Incident/Emergency Care Training (annual) | ✓ | ✓ | ✓ | ✓*** | ✓ | ✓ | ✓ |
| CMS Medicare General Compliance Training (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| CMS Medicare FWA Training (annual) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| CMS NEMT Toolbox (annual) | ✓ | ✓ | | | | | |

*If staff member **ever** drives, they must be disclosed as a driver and meet all driver training and screening obligations regardless of job title.

**If not an Oregon license, must submit at least ten (10) years of driving history from the state of license.

***EMT Drivers may substitute their OR EMT license as a Criminal Background Check.

Need Assistance with completing your application? Contact us.thproviders@transdev.com.