

R95 Staff Training Verification Summary

INSTRUCTIONS

- Conduct R95 Trainings for staff using your agency's SAPC-approved R95 Training Presentation.
- At the conclusion of each training, complete a R95 Staff Training Attestation Form with training and attendee details.
- Complete this **R95 Staff Training Verification Summary** after all trainings have been conducted and submit with copies of each completed R95 Staff Training Attestation Form attached.

Note: No fewer than 85% of staff who have direct patient contact must participate in an R95 Training between 7/1/2024 and the 3/31/2025 for your agency to be eligible for this capacity building payment.

AGENCY INFORMATION

Agency Name: _____

Total Number of Staff with Direct Patient Contact* Employed (across all sites): _____

**For the purpose of this activity, "staff with direct patient contact" includes all personnel who interact with patients during the admission, treatment, and discharge processes including clerical staff, drivers, Peer Support Services Specialists, registered or certified counselors, Licensed Practitioners of the Healing Arts (LPHA) and license-eligible LPHAs, etc.*

Total Number of Staff with Direct Patient Contact Trained Using Approved R95 Training: _____

**Complete second page with details for each training conducted*

By signing below, I verify that all trainings were conducted using a SAPC-approved R95 Training Presentation and the information above is complete and accurate.

Agency Leadership Representative Name (Printed): _____

Agency Leadership Representative Title: _____

Signature: _____

Date: _____

Complete one row for each R95 Training conducted and attach the corresponding R95 Training Attestation forms.

Training Date	Name(s) of Trainer(s)	Training Location (include address or indicate virtual)	Total Number of Practitioner Staff Trained

**Add additional pages, if necessary*