

Agency: _____

7.1 – Agency NCI Training Agreement

This document must be signed by the agency CEO and notarized prior to the provision of NCI Core Plus Training. Additionally, each line must be initialed. In the event that any of the following required elements are not in place, the training will not be provided until such time that the required elements are in place.

I affirm that:

- _____ The agency has written policies regarding the use of restrictive interventions as set forth in rule by the North Carolina Division of MH/DD/SAS which have been reviewed by an accrediting body.
- _____ The agency has a human rights committee, which has reviewed the policies on the use of restrictive interventions and has approved a list of physical intervention techniques for use by employees of the agency.
- _____ The agency has written and approved safety procedures in place if "carries" are utilized.
- _____ The agency allows the use of physical restraint only when there is imminent danger to self or others or as a part of a planned intervention.

I understand that:

- _____ This course covers preventative and physical interventions *only*, and does not meet any other training requirements set forth by the state of North Carolina.
- _____ Participants will be taught NOT to attempt a restraint when it is unsafe to do so (i.e., size of consumer, availability of assistance, etc.)
- _____ Each participant MUST pass the Prevention part of the curriculum prior to participating in the physical interventions portion of the training.
- _____ Each participant must demonstrate competence in the execution of the techniques to be certified. The instructor is under no obligation to certify all participants.
- _____ Each participant must attend the entire class to be eligible for certification. Depending on the class size and the number of techniques taught, a Core Plus class will take approximately 16-24 hours.
- _____ Participants who are not dressed appropriately (i.e., open toe shoes, high heels, dressy clothing, etc.) will be asked to leave.

I have read, understand and agree to the terms of this Agreement.

Signature of Agency CEO

Subscribed and sworn before me in my presence this _____ day of _____, 20____
County of _____, State of _____

Notary Public _____ My commission expires on: _____