# Instructor: Provide the information below, and UCD Staff will mark the boxes (on right) as items are reviewed and approved.

|  |  |  |
| --- | --- | --- |
| **Item** | **Trainer/Developer Information** |  |
| **Course Developer (Name):** | Click or tap here to enter text |  |
| **Date Developed:** | Click or tap here to enter text |  |
| **Course Title:** | Click or tap to enter a date |  |
| **Course Length:** | Click or tap to choose |  |
| **Course Length Explanation:** | Click or tap here to enter text |  |
| **Training Modality:** | Click or tap to choose a modality |  |
| **Trainer Expertise:** | Click or tap here to enter text |  |
| **Minimum # of Learners:** | Click or tap here to enter text |  |
| **Maximum # of Learners:** | Click or tap here to enter text |  |
| **Required Course Prerequisites:** | Click or tap here to enter text |  |
| **Recommended Preparation:** | Click or tap here to enter text |  |
| **Primary Intended Audience:** | Click or tap here to enter text |  |
| **Other recommended Audience:** | Click or tap here to enter text |  |

# Course Outline: Provide the information below, and UCD Staff will mark the boxes (on right) as items are reviewed and approved.

|  |  |  |
| --- | --- | --- |
| **Item** | **Trainer/Developer Information** |  |
| **Course Description:** | Click or tap here to enter text |  |
| **Course Goals:** | Click or tap here to enter text |  |
| **Learning Objectives (Knowledge, Skills, Values):** | Click or tap here to enter text |  |
| **Diversity, Equity and Inclusion is Addressed:** | Please describe in detail how DEI is addressed in the course |  |
| **Training Handouts:**  (List all handouts by the order in which they will be used in class): | Click or tap to list all handouts |  |
| **Customized Handouts:** | Check this box if customized materials are required  Check this box if a customization call is required to include additional handouts/materials. |  |
| **Accessibility:** | Course materials meet [ADA Requirements](https://www.ucop.edu/electronic-accessibility/content-providers/index.html)  Course materials do not yet meet [ADA requirements](https://www.ucop.edu/electronic-accessibility/content-providers/index.html) |  |
| **Reference List (APA Format):** | Click or tap here to enter text. |  |
| **References:** | I have cited all material in APA format, including any external handouts, used for training purposes (please note: all courses must have a minimum of 3 professional sources) |  |
| **Copyright/Fair Use:** | [University of California Copyright Guidance](https://copyright.universityofcalifornia.edu/index.html)  I have verified the course content I am using is not copyrighted material; or, if it is copyrighted, I have either obtained permission from the copyright holder, or I have provided proper citation and am using the content in accordance with laws pertaining to copyright and fair use. I am also acknowledging that I understand basic copyright and licensing provisions, as stated on the [University of California Website.](https://copyright.universityofcalifornia.edu/index.html) |  |
| **Personally Identifiable Information (PII):** | I have not incorporated any content that could be considered Personally Identifiable Information (PII). Any scenarios or materials provided are fictitious in nature. |  |
| **For BBS Classes Only:**  (Describe training activities that allow participants to assess their achievement in accordance with the learning objectives): | Click or tap here to enter text. |  |

# Course Agenda: Provide the information below. Please add additional rows as needed for each training topic

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Time | Training Topic and/or Learning Objective | Training Methods & Activities | Handouts/ Materials/ Video links | Virtual/Hybrid Adaptation |
|  |  |  |  | Enter any special instructions here |
| Break | | | | |
|  |  |  |  | Enter any special instructions here |
| Lunch | | | | |
|  |  |  |  | Enter any special instructions here |
| Break | | | | |
|  |  |  |  | Enter any special instructions here |

**Transfer of Learning Quick Tips for Supervisors**

**Course Title:**Click or tap here to enter text.

*These quick post-class tips sheets are designed to support the supervisor's role in transfer of learning for each specific class attended by a participant. We hope this information provides you with an opportunity to create a structured, focused coaching conversation that will benefit both the learner and your organization.*

**The Supervisor's Role in the Transfer of Learning Process**

*Coaching* is designed to nourish and improve upon the critical thinking skills of the learner through the use of questions designed to get the learner to reflect upon the information they are currently using to make decisions, and what more information they might need to consider in order to make consistently better ones in any number of circumstances.

**The Art of Coaching Learners**

As a supervisor, you play a very important and primary role in helping your workers transfer the skills learned in class to daily practice by providing them with time and space to reflect on their learning. Ask them about the class – what they learned and what would change in their practice if they implemented what was taught in class. Workers need time to think through how and when they will try out new skills. Help them set SMART goals for trying out new practices, i.e., if they have just completed a class on Motivational Interviewing they might say, “I will use complex reflections with three clients in the next four days”.

Tips for supervisors: make time to talk about classes your staff have taken. These questions will help get you started:

What were your key take-aways from the class?

* What would you like to “try out”?
* What support do you need from me to integrate some of this information into your practice?
* What would change for our unit/team if everyone integrated these skills/knowledge?

**Learn More About Coaching and Transfer of Learning**

Visit our coaching website:

* <http://bit.ly/ChildWelfareCoaching>

**Course Description**

*(Provided by program staff):*

Click or tap here to enter text.

**Learning Objectives**

*(Provided by program staff):*

Click or tap here to enter text.

**Preliminary Meeting with Learner**

*(Before the training, 1-3 resources provided by the instructor for the learner to read/assess/watch prior to training):*

Click or tap here to enter text.

**Key Questions to Support the Application of Knowledge**

*(After the training, 3-5 questions provided by the instructor for the supervisor to review and consider posing to the learner):*

Click or tap here to enter text.

# Staff: Please provide the information below and mark the boxes (on right) as items are completed

|  |  |  |
| --- | --- | --- |
| **Item** | **Staff Information** |  |
| **Staff Reviewer:** | Click or tap to enter name |  |
| **Date Reviewed:** | Click or tap to enter a date |  |
| **Recommended # of Trainers (Academy /RCCFP)** | Choose an item |  |
| **Completion of T4T Required to Train the Course?** | Choose an item |  |
| **Training Category (CTS):** | Choose an item |  |
| **Primary Sub-Category (CTS):** | Choose an item |  |
| **Other Sub-Category (CTS):** | Choose an item |  |
| **Certificate of Completion Issued?** | Choose an item |  |
| **Series Offered:** | Choose an item |  |
| **Series Title:** | Click or tap here to enter text |  |
| **Destiny Course # (NTA/ RCFFP):** | Click or tap here to enter Course ID |  |
| **ICPM Category (NTA/RCFFP):** | Choose an item |  |
| **Professional Credit:** | **CEU** – Enter credit quantity  **BBS Hours** – Enter credit quantity if checked  **BRN Hours** – Enter credit quantity if checked |  |