

Form 14

PAIP Training (all in person) Tracking Documentation Form

Agency Name:

This document serves to verify that this staff/volunteer person has completed the PAIP training, as required by the Illinois Certified Domestic Violence Professional requirements.			
Start Date:	Staff/Volunteer Name:		
Completion Date:	Approved by:		
CPAIP Required Topics	Agency Topic / Time Frame	Date Covered	Trainer Initials
Introduction (.25 hrs.)			
• Define PAIP program			
• Overall objectives			
Orientation to Group Process (1.0 hrs.)			
• Understanding group cohesiveness			
• Creating a learning atmosphere			
• Assessing group effectiveness			
• Utilizing the control log in group			
Domestic Violence Information (1.0 to 1.75 hrs.)			
• Characteristics of abusers and their role in the group process			
• Impact of abuse on victims, children and society			
• Representing the victim in group			
PAIP issues (2 hrs.)			
• Historical development of PAIP			
• Key components of effective PAIPs			
• Theoretical components			
• Compare and contrast PAIPs with therapeutic interventions			
• Components of a Protocol Approved PAIP			
• Intake/referral process			
• Assessment procedures including exclusion requirements			
• Effective PAIP evaluation			

