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|  | **Staff Information** | | | | **Enter Dates of Most Recent Training (Month/Day/Year)** | | | | | |
| SUD Recipient Rights | Level 1 Communicable Disease | Cultural Competency | Limited English Proficiency | Corporate Compliance/ Medicaid Integrity | Grievance & Appeals |
| # | **Last Name** | **First Name** | **Position** | **Hire Date** | **Improving MI Practices** | | | | | **cmhpsm.org/sudtraining** |
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