



Training Acknowledgment

Employee Name: Brianna Winowiecki Policy/Procedure/Topic: See Below

Trained By: Jacqueline Wilson Date Trained: 05/28/2020

I acknowledge that I have received training on the above topic, along with supporting policies, forms and procedures.

I understand that it is my responsibility to adhere to the requirements of the training fully, and if I do not understand my responsibility or need clarification, I will seek immediate assistance from a Home Manager in order to act in accordance with state policy, procedures and company expectations.

I understand that this Training Acknowledgment will become part of my permanent employment record, and that failure to apply the principles I was taught in my training will result disciplinary action, up to and including my termination of employment for failure to follow company policy.

Brianna Winowiecki
Employee Signature

5/27/2020
Date

Jacqueline Wilson
Home Manager Signature

05/27/2020
Date

- Completing Emergency Preparedness Monthly
- Completing Playbooks and rest of

Copy to Employee
Copy to Employee Personnel File/HR

- Completing job duties
- Following the plan of service
- Tow of the home / knowing where the shut off
- Completing ^{A/C} window fire drills
- Emergency table
- Passing meds outside of the home
- Exception report (when to use evacs)
- What to do when a resident refuse a med
- Cleaning the car / the injection / no eating in the car
- time off / vacation request

- Current Medical
- reaching up
- monthly weig H/S + vitals
- documented in 2 places, Book
- midwest note
- * Do a med r/c after every dose
- * POC's less how to fix them out