# Orientation Checklist

☒ Online ☐ Classroom

**BEACON**
Specialized Living

New Hire's Name: **Amanda Forys**

Trainer's Name: **Victoria Brown**

Site and Home Manager: **Nunica-Jessica Kibiloski**

Orientation Start Date: **8/10/2020**

Orientation End Date: **8/12/2020**

| | Prior to Orientation | During Orientation | After Orientation |
|---|---|---|---|

| | Date Completed | |
|---|---|---|
| ☒ | 8/10/2020 | Reach out to new hire and welcome them to Beacon. (Online Orientations) |
| ☐ | | |

| | Prior to Orientation | During Orientation | After Orientation |
|---|---|---|---|

| | Date Completed | |
|---|---|---|
| ☒ | 8/12/2020 | Check and upload Online Recipient Rights Certificate into Star Service. |
| ☒ | 8/11/2020 | Upload CPI Card and/or documentation as offline reporting in Star and on the CPI site as required. Training was not completed in orientation. Training scheduled for: ___Need physical skills follow up_____ |
| ☐ | | Upload CPR/First Aid Card and/or documentation as offline reporting in Star and on the CPI Site as required. Training was not completed in orientation. Training scheduled for: _____ |
| ☒ | 8/12/2020 | Run a User Engagement or CourseLessonTimeTaken report and allocate all training hours. (ONLINE ORIENTATION) *Enter last date of timecard allocation as your date completed.* |
| ☒ | 8/12/2020 | Double-check timecard punches and make sure all hours are allocated to training. (Classroom Orientation) *Enter last date of timecard allocation as your date completed.* |
| ☒ | 8/12/2020 | Schedule Shadow Shifts and additional trainings in MakeShift. |
| ☒ | 8/12/2020 | Reach out to the Home Manager to update them on the New Hire's progress and schedule (post-orientation training, shadow shifts, etc). |
| ☐ | | |

| | Prior to Orientation | During Orientation | After Orientation |
|---|---|---|---|

| | Date Completed | |
|---|---|---|
| ☐ | | Upload Classroom Recipient Rights Certificate and/or documentation into Star Service if completed during orientation.<br>If not, training is scheduled for: _____ |
| ☐ | | Upload DMA Classroom Training Documentation if completed during orientation.<br><br>If not, training is scheduled for: _____ |
| ☐ | | Upload Gentle Teaching documentation into Star Service if completed during orientation.<br><br>If not, training is scheduled for: _____ |
| ☒ | 8/12/2020 | Run Offline Training Report and verify that all online training has been completed and certificates/documentation has been uploaded. |
| ☐ | | Upload this completed form into the New Hire's Offline Training. |
| ☒ | 8/14/2020 | Verify with Home Manager that New Hire showed up to their Shadow Shifts |
| ☐ | | Staff & HM follow-up (7-14-30 days) |

## Trainer Acknowledgement

I, | _____ Victoria Brown _____ | (trainer) am stating that the trainee has completed all trainings as outlined above.

## Training Notes