BEACON
Specialized Living

EVALUATION FORM

Direct Care Staff

Date of Hire: 12-17-2020 Name: James Werstine Date: 6-11-2020

A. The following categories represent the major scope of the employee's responsibilities. Each area is to be rated by the employees supervisor. Based on the 3 items listed below, please check the rating box for each category which most closely identifies the employee's annual performance and competency levels.

1. YES (Y): All standards/expectations are met in that Category.
2. NO (N): None if the standards/expectations were met in that Category.
3. INCOMPLETE (I): Some of the standards/expectations were met in that Category.

Competency Category	Y	N	I	Explanation of Rating
Employee Attendance: On time, no call offs, work attendance within policy guidelines. As evidenced by Time Sheets.	○	○	●	James has called in once without finding coverage since being with Beacon. James is very reliable, shows up to his shifts on time, comes in early, stays late when needed, and picks up shifts when able.
Completes electronic & paper documentation correctly at the end of each shift. As evidenced by incomplete documentation. (unfinalized notes, unsealed forms, incomplete data on paper documentation)	●	○	○	James completes all paperwork by the end of his shift.
Mandatory Reporting is done on time, when required. (ie: abuse, neglect, AWOLs, etc..) As evidenced by Incident Report or Reports from internal or external parties.	●	○	○	James completes all event and incident reports when they happen.
Follows all company Policies and Procedures. As evidenced by no Progressive Actions.	●	○	○	James follows all company polices and procedures.
Completes assignments from Management Staff. As evidenced by Home Manager or no Progressive Actions.	●	○	○	James will complete all tasks that ate asked of him.
Complete shift duties, including daily cleaning tasks, assists & interacts with residents and follows activities schedule. As evidenced by Progress Notes, no Progressive Actions and appearance of home.	●	○	○	James always completes his shift duties and the home is clean and organized when day shift arrives.
Prepares, implements and follows the Dietary needs of all residents. (Menus, Diet Orders) As evidenced by documentation on menus and observation of meals being served.	●	○	○	James follows the menu accordantly
Mandatory meetings and trainings attended. As evidenced by Sign-in Sheets or Training documentation.	●	○	○	James attends all meetings and is up to date on his trainings
For assigned Residents, adheres to the Treatment and/or Behavior Plans goals and objectives. As evidenced by Progress Notes.	●	○	○	James knows the residents goals and behavior plans.

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Strengths:

1. James does not engage in gossip and is a "team player"
2. HANDLE STRESS WELL

Areas for Development:

1. Learning more policies and procedures
2. SPEAKING UP WHEN STAFF IS NEGATIVE,

B. Please state at least two goals/objectives you would like to accomplish in the next year:

1. Goal: Becoming a lead staff on night shift
   How will I get there?: Learning more policies and procedures.

2. Goal: LEVEL UP IN THE APPROPRIATE TIME LINE
   How will I get there?: STUDY

Are annual In-Service Trainings complete? ☑ Yes ☐ No
If no, when are they scheduled? _____

Is TB test current (3 years)? ☑ Yes ☐ No
If no, one needs to be scheduled immediately.

Is Annual Health Review Form current? ☑ Yes ☐ No
If no, one needs to be filled out immediately.

Is Driver's License current/valid? ☑ Yes ☐ No
If no, needs to be renewed immediately.

Employee Signature _____ Date 6-12-20

Evaluator's Signature _____ Date 6-12-20