

Orientation Checklist

 Online

 Classroom


New Hire's Name: Veronica Borchert

Trainer's Name: Amber Beltran

Site and Home Manager: Saunders Point-Tori Frazier

Orientation Start Date: 9/21/2020

Orientation End Date: 9/24/2020

Prior to Orientation

During Orientation

After Orientation

| | Date Completed | |
|-------------------------------------|----------------|---|
| <input checked="" type="checkbox"/> | 9/21/20 | Reach out to new hire and welcome them to Beacon. [Online Orientations] |
| <input type="checkbox"/> | | |

Prior to Orientation

During Orientation

After Orientation

| | Date Completed | |
|-------------------------------------|--|---|
| <input checked="" type="checkbox"/> | 9/22/20 | Check and upload Online Recipient Rights Certificate into Star Service. |
| <input type="checkbox"/> | 10/4/20 no card to upload yet | 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: _____ |
| <input type="checkbox"/> | | 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: _____ |
| <input checked="" type="checkbox"/> | 10/4/2020 | Run a User Engagement or CourseLessonTimeTaken report and allocate all training hours. [ONLINE ORIENTATION] <i>Enter last date of timecard allocation as your date completed.</i> |
| <input checked="" type="checkbox"/> | 10/4/2020 | Double-check timecard punches and make sure all hours are allocated to training. [Classroom Orientation] <i>Enter last date of timecard allocation as your date completed.</i> |
| <input checked="" type="checkbox"/> | Scheduled before training was complete | Schedule Shadow Shifts and additional trainings in MakeShift. |
| <input type="checkbox"/> | | 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 | | |
| <input type="checkbox"/> | | Upload Classroom Recipient Rights Certificate and/or documentation into Star Service if completed during orientation. If not, training is scheduled for: _____ | |
| <input type="checkbox"/> | | Upload DMA Classroom Training Documentation if completed during orientation. If not, training is scheduled for: _____ | |
| <input type="checkbox"/> | | Upload Gentle Teaching documentation into Star Service if completed during orientation. If not, training is scheduled for: _____ | |
| <input checked="" type="checkbox"/> | 9/28/2020 | Run Offline Training Report and verify that all online training has been completed and certificates/documentation has been uploaded. | |
| <input checked="" type="checkbox"/> | 10/4/2020 | Upload this completed form into the New Hire's Offline Training. | |
| <input type="checkbox"/> | Scheduled w/o trainer knowing | Verify with Home Manager that New Hire showed up to their Shadow Shifts | |
| <input type="checkbox"/> | | Staff & HM follow-up (7-14-30 days) | |

Trainer Acknowledgement

I, Amber Beltran (trainer) am stating that the trainee has completed all trainings as outlined above.

Training Notes

Veronica began in home before training was complete which resulted in a slow completion of online training. She had to be reminded several times to complete her trainings. HR was involved to ensure completion and discuss training process moving forward. She still needs CPR course, CPI/PCM course and RR classroom. Added trainer to email chain.