



EVALUATION FORM
Direct Care Staff - Level V

Date of Hire: 2/26/2019 Name: Kristine McPike Date: 2/18/21

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
Follows all company Policies and Procedures. As evidenced by no Progressive Actions.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Follows all company policies and procedures
Employee Attendance: On time, no call offs, work attendance within policy guidelines. As evidenced by Time Sheets.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Excellent attendance, stays over as needed or picks up extra shifts
Administers medication for all clients in the home	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Administers all medications as prescribed while on shift.
Completes new client orientation in a timely and effective manner. Makes the client feel welcome and at home.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Excellent at interacting with new clients, making them feel welcomed
Training and completion of the orientation checklist with new employees is done properly and in a timely manner	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Completes all new hire paperwork as needed
Assists in coverage of houses when needed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Willing to assist where needed
Participates in the interview and evaluation process when requested	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Assist with evaluations as needed. Does not participate in interviews
Ensures daily and monthly vitals and weights are recorded and accurate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Prompt at completing daily and monthly vitals
Maintains and completes accurate sharps, cigarette, and phone logs	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Goes over staff documentation
Has a strong understanding of the fire drill procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Excellent at knowing procedure for fire drills
Prepares craft and activity ideas	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Engages in activities with the clients daily



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Strengths:

- 1. Firm understanding of all required task and daily duties.
2. Excellent at remaining calm during high conflict situations.

Areas for Development:

- 1. Continue to gain knowledge of company policies and procedures.
2. Hold staff accountable for their own duties.

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

- 1. Goal: To become a better Lead.
How will I get there?: Continue working on policies and strategies
2. Goal: To become cross trained so I can assist with office task
How will I get there?: Ask management to slowly show me task

Are annual In-Service Trainings complete? [X] Yes [] No
If no, when are they scheduled?

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

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

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

[Handwritten Signature]
Employee Signature

2-18-21
Date

[Handwritten Signature]
Evaluator's Signature

2/18/21
Date

[Handwritten Signature]
Home Manager's Signature

2/18/21
Date