



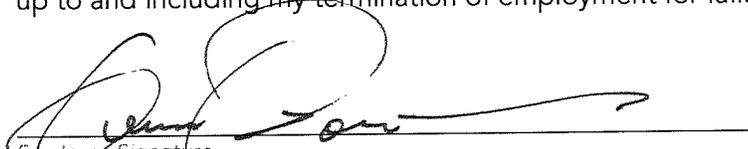
Training Acknowledgment

Employee Name: GERALD ROSS Policy/Procedure/Topic: TABLET
Trained By: KATHLYN COUTURER, LMSW Date Trained: 3/16/21

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.


Employee Signature


Home Manager Signature

16 MAR 2021
Date

3/16/21
Date

Copy to Employee
Copy to Employee Personnel File/HR

Question / Answer on Computer and Internet Access Policy

1. What are tablets to be used for:

- ✓ Beacon Clinician: Case Management, Therapy, BTP monitoring, other
- ✓ Friday Events (Lauren Thompkins)
- ✓ Compliance
- ✓ Home Audits

2. Where do you plan to keep the tablet *med room/office*

- Is it accessible when the home manager and assistant are not in the home? *yes*
- Is it accessible for night staff? *yes*
- Is it accessible for weekend staff? *yes*

3. When will this be charged?

- ✓ At least over night every night

4. Who is going to inservice the rest of your staff

- ✓ Home manager *me*

5. Is the resident allowed to use the tablet in private?

- Yes – home manager may want to have the resident use the office and the manager steps out if there is concern that the resident will not return the tablet