EMPLOYEE ORIENTATION FORM

(Per Title 17, Section 56013)

EMPLOYEE:_____ Date of Hire:_____

ADMINISTRATOR:_____

FACILITY:_____

All new direct care staff must receive orientation within the first 40 hours of hire. Each of the following topics must be reviewed with the new employee.

1. Facility Program Design Review

_____
Staff Signature Date

2. Review of all consumer IPP's

_____
Staff Signature Date

3. Consumer Rights/Grievance Procedure

_____
Staff Signature Date

4. Administration of Medications/Documentation

_____
Staff Signature Date

5. Emergency Procedure/Fire/Earthquake

_____
Staff Signature Date

6. Reporting/Documenting SIR's

_____
Staff Signature Date

7. Reporting/Documenting Abuse

_____
Staff Signature Date

_____ _____

Administrator/Trainer's Signature Date of Completion