

PERSONNEL POLICY AND PRACTICE MANUAL

NEW EMPLOYEE ORIENTATION CHECKLIST

EMPLOYEE _____ TITLE _____

STARTING DATE _____

SIGNATURE OF SUPERVISOR GIVING ORIENTATION _____

LIST INITIAL

- _____ 1. REVIEW THE JOB DESCRIPTION
- _____ 2. EXPLAIN QUALITY AND QUANTITY OF WORK DESIRED
- _____ 3. EXPLAIN PROBATIONARY PERIOD AND WHETHER EMPLOYMENT IS TO BE FULL TIME,
PART-TIME, OR ON-CALL BASIS
- _____ 4. EXPLAIN TIME SCHEDULE
- _____ 5. REVIEW, COMPENSATION
- _____ 6. DISCUSS AND EXPLAIN EMPLOYEE BENEFITS
- _____ 7. DISCUSS COFFEE AND LUNCH BREAKS
- _____ 8. EXPLAIN USE OF TIME CLOCK AND TIMECARDS
- _____ 9. DISCUSS USE OF TELEPHONE, BOTH FOR BUSINESS AND PERSONAL USE
- _____ 10. DEMONSTRATE TELEPHONE INTERCOM SYSTEM
- _____ 11. DISCUSS AND DEMONSTRATE PROFESSIONAL TELEPHONE SKILLS
- _____ 12. SPEAK OF PERSONAL APPEARANCE, DRESS CODES, AND ETHICS
- _____ 13. DISCUSS ACCIDENT PREVENTION AND SAFETY
- _____ 14. EXPLAIN PROCEDURE FOR REPORTING PERSONAL INJURY SUSTAINED BY EMPLOYEE
- _____ 15. EXPLAIN PROCEDURE FOR REPORTING INCIDENTS RELATED TO CUSTOMERS, PATIENTS,
VISITORS OR PERSONAL PROPERTY
- _____ 16. DISCUSS FIRE AND DISASTER PLAN, INCLUDING EVACUATION ROUTES AND
LOCATIONS OF FIRE EXTINGUISHERS
- _____ 17. GIVE JOB INSTRUCTION
- _____ 18. GIVE INSTRUCTIONS ON HOW TO OPERATE EQUIPMENT PERTAINING TO THE SPECIFIC
JOB DESCRIPTION
- _____ 19. DISCUSS INFECTION CONTROL TECHNIQUES
- _____ 20. DISCUSS CONFIDENTIALITY AND RELEASE OF INFORMATION
- _____ 21. COMPANY LITERATURE:
 - A. PRESENT AND DISCUSS GROUP INSURANCE BOOKLET, IF APPLICABLE
 - C. PRESENT COPY OF THE EMPLOYEE JOB DESCRIPTION (AS REVIEWED IN #1 ABOVE)

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LIST
INITIAL

- _____ 22. TOUR THE FACILITY AND INTRODUCE EMPLOYEE TO COWORKERS
- _____ 23. DISCUSS LINE OF AUTHORITY
- _____ 24. DISCUSS ATTITUDE TOWARD PATIENTS AND/OR FELLOW WORKERS
- _____ 25. GIVE EMPLOYEE OPPORTUNITY TO ASK ANY QUESTION THEY MIGHT HAVE

I CERTIFY THAT I HAVE RECEIVED AND UNDERSTAND THIS ORIENTATION. I HAVE READ A COPY OF THE POLICY AND PROCEDURE MANUAL INCLUDING THE FIRE POLICY AND JOB DESCRIPTION.

EMPLOYEE

DATE