

Employee Name: _____

A. General Orientation was completed on: _____

B. General Orientation for Nursing Service was completed on: _____(if a CNA)

C. Job Specific Orientation below.

Criteria	Information Source	Employee Signature	Instructor signature	Date
1. Schedules	DON/ADON	0	8	
nursing service in	,			
accordance with				
facility staffing				
2. Assist in	DON/ADON			
maintaining	Human			
record of call-outs,	Resources			
days absent,				
tardiness as				
directed by the				
DON				
3. Reviews all	DON/ADON			
scheduling				
changes and				
obtains approval				
from the DON or				
ADON prior to				
implementing				
4. Maintains	DON/ADON			
current hall				
divisions, feeding				
bathing				
assignments and				
updates when				
necessary	DON (ADON			
5. Notifies	DON/ADON			
Resident Care				
Manager of				
changes in				
scheduling that				
may affect the				

Criteria	Information Source	Employee Signature	Instructor signature	Date
operation of their				
unit or facility				
6. Daily Mon-Fri	DON/ADON			
post direct care				
staffing				
7. Complete PPD	DON/ADON			
report and faxes to				
Corporate				
Director of QA -				
Mon-Fri				
8. Maintains	DON/ADON			
current employee				
phone numbers				
and addresses				
9. Notifies	DON/ADON			
personnel director	Human			
of absence related	Resources			
to FMLA				
10. Obtains	DON/ADON			
approval for				
vacation or				
scheduled days off				
from DON/ADON				
before scheduling				
11. Clerical duties	DON/ADON			
as assigned by the				
DON/ADON or				
Administrator				
12. Assist	Human			
personnel director	Resources			
in maintaining				
attendance				
records				
13. Job	DON/ADON			
Description				

D. CNA Skills Check Completed on: ______ (if a CNA.)

(Attach skills check to this orientation)