St. Clair County Community Mental Health Authority

Employee Orientation Worksheet

Para	professional	/Technician
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NAME:	TO BE COMPLETED BY:
PROGRAM:	DATE OF HIRE/TRANSFER:
JOB CLASS:	ASSIGNED TO BUDDY (Same Discipline):

JOB CLASS: ASSIGNED TO BUDDY (Same Discipline):				
Assignment	Required By:	Assigned	Completion Date	Verified (Initials)
How and when to complete time sheets: Review the Personnel; Work Schedules; Leave time; Overtime; Timecards Policy 06-001-0075 Policy 06-001-0075 Absenteeism notification	All			
How and where to get supplies	All			
How lunch hours and breaks are taken	All			
Mileage explained – Review the Travel and Business Reimbursement Policy 07-003-0020: Copy of mileage chart provided	All			
In depth description of program function	All			
Overview of how this program relates to other programs	All			
Thorough explanation of prioritized Functional Job Task List	All			
Review the Corrective/Disciplinary Action Policy 06-001-0055	All			
 Safety Orientation Orient to building emergency drills/procedures, ie, fire alarm Know locations of fire extinguishers Review emergency exit diagram Know location of first aid kit and personal protective equipment Review the Employee Medical Situations Policy 09-003-0030 Knowledge of process of reporting safety concerns Review the Emergency Procedures Handbook Review the Building Health and Safety Policy 09-001-0005 	All			
Review the Critical Incident Stress Management Plan Policy 06-001-0125	All			
Review the Recipient Rights Policy 05-001-0005	All			
Review the Release of Case Record Information Policy 03-002-0030	All			
Review the Harassment in Workplace Policy 06-001-0105	All			
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HR Form # 06-0817 Revised Date: 1/1/2024 Policy Ref: #06-002-0006

	Assignn	nent	Required By:	Assigned	Completion Date	Verified (Initials)
Review the Cultural Competency Policy 06-002-0010			All			
Review the Employee Performance Review & Development Policy 06-001-0030			All			
Review the Personal Involvement with Person Receiving Services Policy 06-001-0005			All			
Review the Vehicles: Accidents/Name Releases Policy 09-002-0020			Facility Tech MH Asst.			
Review the Cellular Phones Policy 08-001-0020		All				
Review the Transporting Individuals Receiving Services in Personal Vehicles Policy 09-002-0005			Facility Tech MH Asst.			
screen ur	nder Guides and Indexes	ntranet Home Page by clicking You can search for a policy b ide by the guidelines of each	y name or number	. By signing t	•	
Superviso	or Signature	Date	Employee Signati	ure	Г	Date
Original: Cc:	Personnel File Employee Supervisor					

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