**Southern NH Services, Inc. Child Development Program**

**New Staff Orientation Checklist**

**Employee Name:** *Your name* **Start date:** *Hire date*

**Center/Class:** *Center/classroom* **Position:** *Job title*

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| **1. HR Orientation: Scheduled:** *Date/time* **Completed:** *Date/initial* |
| **2. 90-Day Requirements: 90-Day Date:** *Date* **Completed:** *Date/initial* |

Sign up for a ProSolutions Account. See Orientation Checklist Website Links 2018-2019 & follow steps provided. Complete the following 90-Day Health & Safety Trainings. **PRINT CERTIFICATES!!**

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| *Date* | CC Licensing Orientation | *Date* | Building & Physical Premises Safety |
| *Date* | Prevention & Control of Infectious Diseases | *Date* | Recognizing & Reporting Child Abuse & Neglect |
| *Date* | Administration of Medication | *Date* | Emergency Preparedness & Response Planning |
| *Date* | Prevention & Response to Allergic Reactions | *Date* | First Aid/CPR Up to Date: *Date* |
| *Date* | Child Development Milestones |  | * Expiration Date: *Date* |

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| **All Home Visitors and Staff in a center with Infant Toddler Programming must complete:**  **Completed Date:** *Date* | |
|  | Prevention of SIDS and Use of Safe Sleep Practices/Prevention of Shaken Baby Syndrome and Abusive Head Trauma |

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| **Other: Completed Date:** *Date* | |
| *Date* | Within 30 days of employment: Read ***Onsite Emergency Operations/COOP Plans*** for assigned sites. Sign Emergency Operations Acknowledgement form. |
| **See Orientation Checklist Website Links 2018-2019 (on Weebly) for training listed below:** | |
|  | * Active Supervision PowerPoint, including Videos for teaching staff – “What’s the Count” & “Positioning” |
|  | * Asthma/Medication Administration Video Training |
|  | * Complete USDA CACFP On-Line Training |
|  | * Complete USDA Civil Rights Training |
|  | * ProSolutions: Building Positive Social Emotional Skills for All Children: Introducing the Pyramid Model Framework |

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| **3. Program Information: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Head Start Performance Standards | *Initial* | Vision/Mission; Organization Chart/Site List |
| *Initial* | Program Goals and Objectives | *Initial* | Core Values; Caregiver Code of Conduct |
| *Initial* | Non-Federal Share | *Initial* | HS Videos: Leading the Way or HS Advantage |

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| **4. General Orientation:** **Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Site Orientation | *Initial* | Site Fire Drill Procedures |
| *Initial* | Sign in/Sign out Procedures | *Initial* | Supervision System/Professional Development |
| *Initial* | Rest Time Policy | *Initial* | ADP |
| *Initial* | Electronics Usage Guidelines | *Initial* | Pedestrian Safety |
| *Initial* | SNHS Safety Procedures/Manual (iNet) | *Initial* | Boundaries/Confidentiality |
| *Initial* | Staff PE & TB Screening Requirements | *Initial* | Opening/Closing Procedures |

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| **5. Fiscal & Management Information: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Labor Laws & Payroll/ADP | *Initial* | Employee Files – Licensing/HR |
| *Initial* | Purchasing Procedures/Petty Cash | *Initial* | Ongoing Supervision/ Performance Appraisals |
| *Initial* | Non-Federal Share | *Initial* | Maintaining Licensure |
| *Initial* | Child Care Scholarship | *Initial* | Weekly/Monthly paperwork & checklist req.’s |
| *Initial* | Wrap-Around Child Care Services | *Initial* | Background Check Procedures/fingerprinting |

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| **7. ERSEA: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Program Options | *Initial* | Recruitment |
| *Initial* | Application/Eligibility Training | *Initial* | Attendance/Tracking |
| *Initial* | Enrollment Process | *Initial* | Wait List Management |

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| **6. Family Services: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Family Worker/Home Visitor Role | *Initial* | Home/Center Visits |
| *Initial* | Family Services Guiding Principles | *Initial* | Goal Setting/ PFCE Framework/Coaching |
| *Initial* | Abuse/Neglect Reporting Policy | *Initial* | Family Education/Resources/Weebly |
| *Initial* | Personal Safety | *Initial* | Family Engagement Opportunities/ Events/PC//Newsletters |
| *Initial* | Child Plus User Set Up/ Orientation | *Initial* | Family Services Monitoring/Expectations |
| *Initial* | Child Plus Directions & Documentation | *Initial* | Schedule job Shadow (FS staff only) |

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| **8. Disabilities: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Disabilities Info Manual (online) | *Initial* | Disability Tracking |
| *Initial* | Developmental Screening | *Initial* | Referral Process |
| *Initial* | Individualization/Accommodation Plans | *Initial* | Dual Language Learners |
| *Initial* | IEP (Individual education plan) | *Initial* | IFSP (Individual family service plan) (EHS only) |

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| **9. Education: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Creative Curriculum overview/log in | *Initial* | Lesson Planning/studies/emergent approach |
| *Initial* | DLL/Multicultural classrooms | *Initial* | Screenings/ASQ 3 |
| *Initial* | Daily Schedule, transitions, rest time, outdoor play/environments | *Initial* | Parent Engagement/ Home School Connections/Read a Thons/volunteers |
| *Initial* | Documentation/Assessments/Ipad use | *Initial* | Classroom Management/Team approach |
| *Initial* | ELOF/NH Early Learning Standards | *Initial* | CLASS |
| *Initial* | NAEYC Code of Ethical Conduct | *Initial* | Coaching Opportunities |
| *Initial* | Teacher: Child Interactions |  |  |

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| **11. Health Content Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Health enrollment requirements | *Initial* | Emergency Preparedness (site specific) |
| *Initial* | Individual health plans & medications in the center | *Initial* | Health screening requirements, monitoring, monthly tracking, & follow up |
| *Initial* | Classroom health & safety | *Initial* | Health screening equipment/Scheduling |
| *Initial* | Exclusion for illness policy | *Initial* | EPSDT/ PIR Introduction |
| *Initial* | Ergonomics | *Initial* | Child Plus/Health Data Entry Overview |

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| **12. Nutrition Content Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | USDA CACFP/ Monitoring/ Meal patterns | *Initial* | Food Allergies/special diets |
| *Initial* | Nutrition assessments/referrals | *Initial* | Classroom Nutrition education |
| *Initial* | Supply Orders | *Initial* | Apple a Day |
| *Initial* | Infant Production records/ Infant feeding | *Initial* | Food service |
| *Initial* | Family Style meals/ Food Policy/Choking Hazards | *Initial* |  |

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| **13. Social Emotional: Scheduled:** *Date/time* **Completed:** *Date/initial* | | | |
| *Initial* | Behavior Management Procedures/Pyramid Model | *Initial* | Social Skills Agenda/Positive Solutions Overview |
| *Initial* | ASQ: SE screening process | *Initial* | Resources |
| *Initial* | Referral Process | *Initial* | Monitoring Process |
| *Initial* | Monthly Tracking | *Initial* |  |

*Signature* *Date* *Signature* *Date*\_\_\_\_\_

**Employee Signature Date Supervisor Signature Date**

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