

Self-Directed Employee Orientation

In order to ensure appropriate service to all individuals served, and be in compliance with State of NJ Division of Developmental Disabilities requirements, all Self-Directed Employees must complete an orientation developed by the Managing Employer. This must be completed within 30 days of hire, but should be completed as soon as possible.

The following information has been reviewed with _____ in accordance with above-noted requirements:
(Print Employee's Name)

List all covered topics below (these should reflect duties approved on service detail report):

- ✓ Tour of home, including location of any appropriate safety equipment (fire extinguisher, etc.
- ✓ Review of special needs of the individual served
- ✓ Great things about the individual
- ✓ Areas of importance to the individual
- ✓ Best ways to support the individual
- ✓ Information about how the individual communicates
- ✓ Other (List): _____
- ✓ Other (List): _____

Managing Employer Attestation

As the Managing Employer, I am comfortable that the above-named employee has been properly trained regarding his/her role in providing support to address the needs identified in the service plan. I have answered all questions and provided clarification of requirements as needed. I understand that this employee cannot perform duties outside of his/her job description or exceed the approved number of hours without prior authorization and approval from DDD.

Printed Name

Signature

Date

Employee Attestation

As the Self-Directed employee providing support, I am comfortable that I have received appropriate training regarding the needs of the individual I am working with and the duties of my role as a Self-Directed Employee. I have asked questions if needed and am comfortable with the answers provided. I understand that I am only to perform duties as noted in my job description.

Printed Name

Signature

Date