



**Department of
Early Education and Care**

THE COMMONWEALTH OF MASSACHUSETTS

Staff Orientation Checklist

Documentation of orientation must be maintained in the personnel record of each employee. In accordance with 7.09(17)(a)1, an educator may not supervise or be solely responsible for children in care until this minimum orientation is provided.

Program orientation requirements 7.09 (17)(a)

- Employee’s job description
- Personnel policies
- Statement of purpose
- Statement of non-discrimination
- Health care policy, including medication administration policies and infant sleep
- Information in children’s records pertaining to the education and care of the children
- Confidentiality policy
- Child guidance policies and procedures for protecting children from abuse and neglect
- Suspension and termination policy
- Emergency plans and procedures
- Program plans
- Referral procedures
- Transportation plans
- Procedures for parent visits, input, conferences and communication
- Identification of the Department of Early Education and Care as the licensing authority
- Availability of EEC Standards for the Licensure or Approval of Small Group and School Age and Large Group and School Age Child Care Programs at program

EEC orientation requirements

- Training: “An Introduction to Early Education and Care in Massachusetts” for new educators (within 60 days of hire) 7.09(9)
- Training: “Look Before You Lock” for all staff (within 60 days of hire)
- Training: “Reducing the Risk of SIDS in Child Care” for educators (prior to caring for infants)
- Training: “Medication Administration: The Five Rights” for all educators who administer medication (Training must be completed before administering medication) 7.11(1)(b)(1)
- Training in recognizing common side effects and adverse reactions of medications for all educators (within 60 days of hire). 7.11(1)(b)(3)
- Training on USDA nutrition requirements and in food choking hazards for all educators 7.12 (2) (a-b)

Signature of Employee_____

Signature of person conducting the orientation _____

Date of Completion_____

Number of hours of the orientation_____