

MEDI-CAL FACILITY SITE REVIEW STAFF EDUCATION CHECKLIST

Employee Name and Title _____

ANNUALLY STAFF EDUCATED ON THE FOLLOWING TOPICS	EDUCATION FORMAT: Lecture Self –Learning materials	Staff Signature	INITIAL EDUCATION DATE	ANNUAL RE-EDUCATION DATE(S)		
1. Infection control/Universal Precautions						
2. Blood Borne Pathogens Exposure Prevention						
3. Biohazardous Waste Handling						
STAFF EDUCATED ON THE FOLLOWING TOPICS UPON HIRE AND THEN AS NEEDED			INITIAL EDUCATION DATE	RE-EDUCATION DATE(S)		
4. Fire Safety/Prevention						
5. Emergency Non-Medical Procedures						
6. Emergency Medical Procedures						
7. Child/Elder/Domestic Abuse Reporting						
8. Patient Confidentially						
9. Informed Consent, including Human Sterilization						
10. Prior Authorization Requests						
11. Grievance/Complaint Procedure						
12. Sensitive Service/Minor Rights						
13. Health Plan Referral Process/Procedures/Resources						
14. Workplace Force Violence						
15. Other:						