

# New Employee Checklist

EMPLOYEE INFORMATION		
Employee Name: (First, Last, Middle Initial)	Employee Number	Hire Date
Department Name	Job Title	

*Check off each item after discussion between new employee and supervisor. Sign when completed and provide a copy to the employee and retain the original in the Department File.*

## Section I: Preparing for Your New Employee's Arrival

*Create the new employee's first impression while confirming (s)he made the right decision.*

### Do:

- ☐ Departmental announcement (Optional: Welcome sign/ welcome gift)
- ☐ Establish telephone, computer access, email accounts, ID badge request via the [Lotus Notes Online Access Request](#)
- ☐ Workspace preparation
- ☐ Update phone lists, department directories, databases, organizational charts

### Discuss:

- ☐ Provide critical first-day information (e.g. where to report, report time, contact numbers, where to park, etc.)

### Plan for Next Phase – First Day

- ☐ Prepare itinerary for first week, schedule appointments with key personnel

## Section II: Welcoming Your New Employee: The First Day

*Welcome the new employee and provide them with the information to get started.*

### Review What's Occurred:

- ☐ Confirm all administrative requirements have been completed.

### Do:

- ☐ Welcome to the workplace – Introduction to staff & tour of workplace
- ☐ Assignment of a co-worker 'buddy'
- ☐ [Ergonomic Assessment of Workstation](#)
- ☐ Key and/or access card issuance, Building Security Overview
- ☐ Give time for the new employee to set-up work area
- ☐ Secure additional items needed by the new employee
- ☐ Have co-worker 'buddy' go to lunch with the new employee

### Discuss:

- ☐ Review itinerary for first week
- ☐ The Position Description
- ☐ [Customer Service Standards](#)
- ☐ [Code of Conduct](#)
- ☐ Discuss Performance Expectations (work quality & quantity requirements)
- ☐ Assignments and timelines
- ☐ [Probationary Period](#) (midpoint evaluation & final evaluation)
- ☐ [Parking & Transportation Services](#)
- ☐ [Performance Appraisals](#)
- ☐ Rate of pay, [salary range](#), shift differential, overtime, on-call, call back (as applicable) Pay periods, Bi-Weekly Payroll Calendar, [KRONOS](#)
- ☐ Hours of work, schedule, break/lunch policies, holiday, attendance standards, dress code

- Location of all Emergency Exits from the work site, assembly area in case of evacuation, Location & Use of all fire extinguishers, fire alarm box, emergency shower, and personal protective clothing/equipment.
- Employee recommended to take Ergo e-SAT course online (Course code # 07845)
- Mandatory Training & Benefits – to be completed by the new employee within 31 days of hire
  - Attend the New Employee Welcome (Date of orientation session: \_\_\_\_\_)  
(Includes New Employee Orientation Mandatory Annual Safety Training)
  - Complete Privacy & Security Training online (Course code # 06528)
  - Complete University of California Ethical Values & Conduct online (Course code # 07842)
  - Attend the Mandatory Benefits Selection Training (Career employees only)
  - Enroll in [Employee Benefits](#) on the [At Your Service website](#)

#### Plan for Next Phase – The First Week

- Determine job and department-specific training to be completed in the first week
- Schedule a day to have lunch with the new employee (optional)

### **Section III: Getting Off to a Good Start: The First Week**

*Help the new employee get acquainted with the Health System and his or her new role.*

#### Review What's Occurred:

- At the end of the first week, confirm the new employee has shadowed the designated colleague.

#### Do:

- Check in often with the new employee
- Invite new employee to key meetings
- Create opportunities for the new employee to interact with other employees
- Invite the new employee to join you and other colleagues for lunch

#### Discuss:

- Department Operations, mission, objectives, & organizational reporting structure
- Office procedures, appropriate use of telephones, computers, email, supplies & equipment
- Requesting Vacation
- Interoffice Communications, including types of communication (telephone, email, interdepartmental mail, & [The Insider](#), Friday Updates)
- [Salary increases, merit eligibility](#) & cycle Compensatory Time Off (CTOP, CTOS) if applicable
- [Paid time Off Program](#)
- [Fair Labor Standards Act](#) (exempt or non-exempt)
- Leaves (*discuss vacation, holiday, religious observances, sick, family & medical leave, & other leaves including military, jury/witness duty, voting, blood donation, administrative & catastrophic*)
- [Collective Bargaining Agreement](#) or [Personnel Policies for Staff Members Fair Share Fee](#)
- [Affirmative Action/Equal Employment Opportunity, Nondiscrimination & Sexual Harassment](#)
- [Violence in the Workplace](#) (Zero Tolerance Policy)
- [Near Relatives](#) (Date Near Relative Letter Completed: \_\_\_\_\_)
- [No Smoking Policy](#)
- [Conflict of Interest](#)
- [Confidentiality & HIPAA Requirements](#)
- Online Campus Directory
- [UC Learning Center](#)

#### Plan for Next Phase – First Month:

- Determine the job and department-specific training the new employee needs to complete during the first month

DEPARTMENT-SPECIFIC ITEMS
<div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;">□</div> <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div> <div style="display: flex; align-items: flex-start; margin-top: 5px;"> <div style="margin-right: 10px;">□</div> <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>

#### Section IV: Learning the Routine: The First Month

*The employee should be feeling more comfortable and ready to take on more responsibility.*

##### Review What's Occurred:

- ☐ By the end of the first month, confirm all Mandatory training has been completed
- ☐ Confirm the employee's knowledge of the following Health & Safety items:
  - ☐ Warn Me Emergency Notification Service
  - ☐ [Campus & Department Safety Plans](#)
  - ☐ Emergency Telephone numbers for Fire, Police, Code Blue, University Emergency Number (911) Location or UCDHS Employee Health & Emergency Room
  - ☐ [Reporting a Work Related Injury](#)
  - ☐ [Academic and Staff Assistance Program](#)
  - ☐ [Substance Abuse](#)
  - ☐ [Hazardous Substances Information & Training](#) (SDS Manual, Location & Program)
  - ☐ [Medical Monitoring and/or preventative medical requirements](#) (if applicable)
  - ☐ Preventing Hazardous Conditions & Accidents (if applicable)

##### Do:

- ☐ Begin to create an Individual Development Plan (IDP)
- ☐ Have the employee take Living the Principles of Community online course

##### Discuss:

- ☐ [Tuition Assistance Programs](#)
- ☐ Training & Development Services
- ☐ Networking opportunities
- ☐ Future projects and assignments per [Individual Development Plan](#)
- ☐ Performance Management instructions and resources
- ☐ Weekly reviews of goals and deliverables
- ☐ Increasing scope and complexity of work

Contact [Human Resources](#) if there are any significant performance/behavior concerns

##### Plan for Next Phase – The First Six Months:

- ☐ Determine the job and department-specific training the new employee needs to complete during the first six months
- ☐ Complete the employee's 90-day performance appraisal
- ☐ Prepare for the employee's six-month performance appraisal and probationary review

##### DEPARTMENT-SPECIFIC ITEMS

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

## Section V: Mastering the Role: The First Six Months

*The new employee is becoming a productive member of the Health System.*

### Review What's Occurred:

- ☐ Confirm knowledge of Training & Development opportunities

### Do:

- ☐ Assign a variety of project types and learning opportunities
- ☐ Conduct 6-month performance appraisal

### Discuss:

- ☐ [SMART goals](#)
- ☐ Department and campus mission revisited
- ☐ Knowledge, skills, abilities and assignments to compliment or enhance strengths.
- ☐ Areas for growth and improvement
- ☐ Monthly reviews of performance expectations and deliverables [Employee Development Worksheet](#)
- ☐ [Probationary Period](#), Probationary period report
- ☐ [Policy 61, Release](#)

### Plan for Next Phase: The First Year:

- ☐ Determine ways to reward and recognize the employee's accomplishments
- ☐ Prepare for the new employee's one-year performance appraisal

## Section VI: Encouraging Employee Engagement: The First Year

*The new employee should have a firm understanding of his or her role; thoughts on if (s)he is a good fit in the department and Health System; ideas and innovation suggestions; and an understanding of whether (s)he sees a career path at the Health System.*

### Review What's Occurred:

- ☐ Confirm employee is progressing on goals

### Do:

- ☐ Complete one-year performance appraisal
- ☐ Ensure employee has renewed certification for all annual Mandatory training
- ☐ Periodic acknowledgements, spot awards, department celebrations such as:
  - ☐ [Recognition and Incentive Award Plans](#) (e.g. UC Excellence)
  - ☐ Chancellor's Achievement Awards
  - ☐ [Diversity and Principles of Community Achievement Awards](#)
  - ☐ Staff Assembly [Citation for Excellence](#)

### Discuss:

- ☐ Discuss Performance Appraisal
  - ☐ [Performance expectations](#)
  - ☐ [Core Competencies and Behavioral Indicators](#)
  - ☐ Summary of Accomplishments
- ☐ [Individual Development Plan \(IDP\)](#)
- ☐ Ways to get involved on the campus and in the community:
  - ☐ [Campus news](#) and communications
  - ☐ [Administrative Advisory Committees](#)
  - ☐ Campus Community Book Project
  - ☐ Employee Interest Groups
  - ☐ Picnic Day, Whole Earth Day, Thank Goodness for Staff (TGFS), Farmers Market, UC Living Fit Forever, Employee Giving Program, Staff Offering Services (SOS)

#### DEPARTMENT-SPECIFIC ITEMS

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

## Section VII: Acknowledgement

EMPLOYEE ACKNOWLEDGEMENT	
<b>Each of the above has been discussed with me by my supervisor. I have also been provided additional resources and a copy of this form.</b>	
Employee Name (Please Print)	
Employee Signature	Date

SUPERVISOR ACKNOWLEDGEMENT	
<b>I have provided this employee with information pertaining to the items above. I have also provided him/her with additional resources and a copy of this form.</b>	
Supervisor Name (Please Print)	
Supervisor Signature	Date

cc: Employee & Department Personnel File