



**TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™**

**NEW EMPLOYEE CHECKLIST
CORRECTIONAL MANAGED HEALTH CARE
(CMHC)**

EMPLOYEE'S NAME:
TDCJ UNIT/LOCATION:
POSITION:
SUPERVISOR'S NAME:

SSN OR TTU R#:
HIRE DATE:

NOTE: This checklist is designed to assist supervisors with the orientation of benefits-eligible staff employees.

Requirements identified with an asterisk (*) apply for ALL new TTUHSC employees.

PRIOR to 1ST DAY of Employment:

Prepare for Employee's Arrival:

- Submit request for TDCJ security clearance
- Prepare employees work area (furniture, supplies, etc.)
- Contact CMHC Human Resources
- Verify Sanction List (HR)
- Verify Credentialing (Credentialing Dept.)

- CMHC HR will provide employee with reporting instructions, NEO date/locations/start time, required employment documentation, and a list of acceptable documents for completing the I-9 form, which must be completed within first three days of employment.

Beginning the 1ST DAY of Employment (or following completion of NEO):

Discuss information and expectations pertaining to HIPAA, (as appropriate) and have employee sign applicable confidentiality forms. Maintain forms per departmental procedures.

NOTE: Supervisor should then continue with the Performance Management process outlined in HSC OP [70.12](#).

- Mission of HSC/Unit/Department
- Copy of Position Description (PD) for review
- Reporting structure
- Telephone procedures/training
- Job title, rate of pay and basic duties
- Hours of work, meal/break periods...
- Vacation, sick leave, overtime...
- Attendance
- Dress code
- Time clock / Leave reporting
- Parking locations/requirements
- Provide a tour of department/work area
- Keys, ID (issuance of TDCJ and/or HSC; Nursing/ClinicianBadges)
- Computer usage/guidelines/access/passwords
- EMR / PRS Access (EMR New User Form)
- Tools, supplies & other work equipment (copier, fax, cell phone, pager...)
- Special accommodations (if needed)
- Workplace safety:
 - Reporting of on the job injury
 - Emergency telephone numbers
 - Location of fire exits, fire extinguishers...
- TDCJ allowable/non allowable items on units

EMPLOYEE'S NAME:

SSN OR TTU ID#:

Within the First 3-DAYS of Employment (if not completed during NEO):

Employment/ Benefit Processing:

____ ***Contact CMHC HR** to include benefits processing. *IMPORTANT: Failure to do so may result in employee missing important insurance eligibility and payroll deadlines.*
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Departmental Orientation with Supervisor:

Conduct Feedback Session (TTUHSC OP 70.12 - Performance Management):
____ Review and discuss Position Description (PD) - (edit/update the PD if necessary)
____ Signatures (both supervisor and employee sign)
____ Copy of PD given to new employee; Copy of PD filed in employee's performance file; Copy of PD in CMHC HR File.

Within the First 10-DAYS of Employment (if not completed during NEO):

____ ***Complete NESOP Level 1, Level 2 and job specific Safety Training:**
____ <http://www.ttuhs.edu/admin/Safety/training.aspx> or contact the Unit DON
____ TB Testing

Within the First 30-DAYS of Employment:

COMPLETE OTHER REQUIRED TRAINING (if not completed during NEO): Go to the Employee Tab on Web Portal at <https://webraider.ttuhs.edu> to access required courses. Log in using your eRaider name and password.

- ____ ***Equal Employment Opportunity, Prevention of Sexual Harassment and Title IX Mandatory** Training Questions? Contact Workforce Education at 806-743-3281 or Toll free at 866-541-7731
- ____ ***Institutional Compliance** Questions? Contact Compliance at 806-743-3949
- ____ ***FERPA Training** Questions? Contact Tamara.Krauser@ttuhsc.edu
- ____ ***Privacy and Security Training (HIPAA)** Questions? Contact Compliance at 806-743-3949.
- ____ ***Conflict of Interest and Commitment Training & Disclosure** Questions? Contact Compliance at 806-743-3949.
- ____ ***Workplace Violence (Recommended for all Employees)** at: <http://www.depts.ttu.edu/tpd/shotsfired.php>
- ____ ***An Extra Degree of Service Training (Required for staff employees)**
Note: Should be scheduled within 30-days/completed within 90 Days. Register online at <http://www.ttuhs.edu/hr/> Wed or call Workforce Education & Development at 806-743-3281

____ **Complete EMR/PRS Training Class: Contact EMR office located at the Pyramid Plaza; Lubbock, TX**

____ **Job/Department Specific Training** (list): _____

____ Ensure that employee has completed and turned in all required employment paperwork to CMHC Human Resources.

____ Additional Notes: _____

ACKNOWLEDGEMENT: *By signing below, I acknowledge that all items contained in this checklist have been completed unless otherwise noted.*

Employee's Signature _____ Printed Name _____ Date _____

Supervisor's Signature _____ Printed Name _____ Date _____

Once completed, make a copy of this checklist and forward it to:
Ralph Rosiles, CMHC Workforce Education & Development,
3223 S loop 289 Ste 210 Lubbock, TX 79423-1352

The original is to be placed in the employee's performance file maintained by the supervisor.

If you have questions or comments, please contact CMHC Human Resources or Workforce Education Office.

Toll Free Number 1-866-541-7731