



Documentation of Safety Training

After attending the Workplace Safety Protocol and Procedures orientation, please initial the following statements and sign below:

_____ I have read and understand the 5 basic caregiver safety procedures.

_____ I have read and understand how to properly inform Pacific Health Systems of an injury that occurred at the workplace.

_____ I understand that I **MUST** utilize proper Lifting Techniques and Body Mechanics.

_____ I have read and understand the importance of proper PPE and to UTILIZE them on the job.

_____ I have read procedures regarding Positions, Positioning and rolling of a client.

_____ I have read and understand the daily essential recommendations and tips on Caregiver Safety.

_____ I have read and understand that the Workplace Safety Protocols and Procedure training webinar is **MANDATORY** and **MUST** be completed to receive credit and coverage. If not, I **forfeit** my ability to file a claim in the event of an incident.

Employee Signature

Date

Pacific Health Systems

Agency's Signature

Date